

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

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0950460.09
Alison Lundergan Grimes
Secretary of State
Received and Filed
4/20/2016 12:00:00 AM
Fee receipt: \$90.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Certificate of Authority
Foreign Business Entity

FBE

Pursuant to the provisions of KRS Chapter 14A and KRS Chapter 273 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **nonprofit** corporation.
2. The name of the entity is **COUNCIL FOR ADULT AND EXPERIENTIAL LEARNING .**
3. The name of the entity to be used in Kentucky is **COUNCIL FOR ADULT AND EXPERIENTIAL LEARNING INC..**
4. The state or country under whose law the entity is organized is **Illinois.**
5. The date of organization is **12/20/1989.**
6. The mailing address of the entity's principal office is **55 E Monroe St Ste 2710, Chicago, IL 60603.**
7. The street address of the entity's registered office in Kentucky is **212 N. 2ND STREET, STE 100, Richmond, KY 40475** and the name of the registered agent in that office is **REGISTERED AGENTS INC..**
8. The names and business addresses of the entity's representatives:

Gabi Zolla 55 E Monroe St Ste 2710, Chicago, IL 60603
Gabi Zolla 55 E Monroe St Ste 2710, Chicago, IL 60603
9. I certify that, as of the date of filing of this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.
10. This application will be effective on filing.

Signature of Authorized Representative:
Suzette Bennett

I, **REGISTERED AGENTS INC.,** consent to serve as the
Registered Agent on behalf of the business entity.

Signature of Registered Agent or individual signing on behalf of
the company serving as Registered Agent:

BILL HAVRE