State of Idaho

Office of the Secretary of State

CERTIFICATE OF REGISTRATION

OF

NATIONAL CERTIFIED PUBLIC MANAGER CONSORTIUM dba NATIONAL CERTIFIED PUBLIC MANAGER CONSORTIUM INC.

File Number C 214027

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: June 2, 2017



SECRETARY OF STATE

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FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2017 JUN -2 AM II: 50

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the entity is: NATIONAL CERTIFIED PUBLIC MANAGER CONSORTIUM							
2.								
3.	(Enter a panic here, only if you are required to adrop an alternate harve)							
	☐ Business Corporation ☐ General Partnership							
	☑ Nonprofit Corporation	· · · · · · · · · · · · · · · · · · ·						
	☐ Limited Liability Partnership	_ · · · · · · · · · · · · · · · · · · ·						
	☐ Limited Liability Company ☐ Statutory Trust, Business Trust, or Common-law Business Trust							
	Other: (Use "Other only if your foreign entity type is not listed obove and enter the type here.)							
	Guisc "Officen" only if your for	reign entry type is got	nto: The	type hore.)				
4.	Jurisdiction of formation: NORTH CAROLINA (Provide the domestic intudiction where the entity was formed)							
5.	The address of its principal office is: 3213 E. BOULDER HEIGHTS DRIVE, BOISE, ID 83712-8513							
	(Shect Address) P.O. BOX 2133, BOISE, ID 83701-2133							
	ik la ktoj Address i fidilecenti							
6.	The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is: 2516 WERTHERSON LANE, RALEIGH, NC 27613-1700							
	(Sicer) Adriesa							
	(Mailing Audress, if different)							
7.	The mailing address to which correspondence should be addressed, if different from item 5, is:							
	(Activa (182))							
8.	Name and street address of registered agent <u>in Idaho</u> :							
	PATRICIA MORGAN 3213 E. Boulder Heights Drive, Boise, ID 83712-8513							
	(Address)							
n								
9.	The name, capacity, and mailing address of at least one governor:							
	CHARLES D. TAYLOR	DIRECTOR	···	/Pub.	Affairs, Ball St	tate Univ., Muncie, I	N 47306	
	सेटिक करा। 	(Capacity)	eledd reser)					
	ilvame)	(Сараску)	(Adoress)					
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				등	06,	/02/2017 05:0	Ð	
	Typed Name: Dennis Martino			ase	CK:1547	CT:340532 BH:1	586982	
	. /			ate	10 100.00	= 100.00 FOR R	EG ST #2	
	Signature: Down Martin			ecretary of State use only				
				fary		C11402	1	
Capacity: Secretary, Board of Directors					•	1714Ud	1	



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

NATIONAL CERTIFIED PUBLIC MANAGER CONSORTIUM

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 5th day of July, 2000, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Nonprofit Corporation Act; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 7th day of April, 2017.

Elaine I. Marshall

Secretary of State

Certification# 100294930-1 Reference# 13722809-ACH Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification