



**Secretary of State**  
**Statement and Designation by**  
**Foreign Corporation**

S&amp;DC-S/N

For Office Use Only

**-FILED-**

File No.: 6411113

Date Filed: 10/3/2024

Must be submitted with a current Certificate of Good Standing issued by the government agency where the corporation was formed.

Filing Fee – \$100.00 (for a foreign stock corporation) or  
 \$30.00 (for a foreign nonprofit corporation)

Certified Copy Fee (Optional) - \$5.00

Note: Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov/>.

E

P

This Space For Office Use Only

1. **Corporate Name** (Go to [www.sos.ca.gov/business/be/name-reservations](http://www.sos.ca.gov/business/be/name-reservations) for general corporate name requirements and restrictions.)

2. **Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

The F. F. Thompson Foundation, Inc.

New York

3. **Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
350 Parrish Street	Canandaigua	NY	14424
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	
c. Mailing Address of Principal Executive Office, if different than Item 3a	City (no abbreviations)	State	Zip Code

4. **Service of Process** (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	

CORPORATION – Complete Item 4c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 4a or 4b

Cogency Global Inc.

5. **Read and Sign Below** (Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

Signature

Michael Stapleton Jr.

Type or Print Name

## STATE OF NEW YORK

## DEPARTMENT OF STATE

## Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** THE F.F. THOMPSON FOUNDATION, INC.  
**DOS ID Number:** 1299785  
**Entity Type:** DOMESTIC NOT-FOR-PROFIT CORPORATION  
**Entity Status:** EXISTING  
**Date of Initial Filing with DOS:** 10/19/1988

I certify that the following is a list of documents on file in the Department of State for said entity:

---

**Document Type:** CERTIFICATE OF INCORPORATION  
**Date of Filing:** 10/19/1988  
**Entity Name:** THE F.F. THOMPSON HOSPITAL FOUNDATION, INC.

---

**Document Type:** CERTIFICATE OF AMENDMENT  
**Date of Filing:** 02/13/1997  
**Name Changed To:** THE F.F. THOMPSON FOUNDATION, INC.

---

**Document Type:** CERTIFICATE OF AMENDMENT  
**Date of Filing:** 05/21/1998

Above space is left blank intentionally.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

WITNESS my hand and official seal of the Department  
of State, at the City of Albany, on April 05, 2024 at  
09:15 A.M.

ROBERT J. RODRIGUEZ, Secretary of State



*Brendan C. Hughes*

By Brendan C. Hughes  
Executive Deputy Secretary of State

Authentication Number: 100005498229 To Verify the authenticity of this document you may access the  
Division of Corporation's Document Authentication Website at <http://ecorp.dos.ny.gov>