Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697

Hope Andrade
Secretary of State

Office of the Secretary of State

CERTIFICATE OF FILING
OF

B-1B.org
File Number: 801173674

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Nonprofit Corporation has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 09/22/2009

Effective: 09/22/2009

Hope Andrade
Secretary of State

Form 202
(Revised 10/07)

Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX: 512/463-5709
Filing Fee: $25

Certificate of Formation
Nonprofit Corporation

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas

SEP 22 2009

Corporations Section

Article 1 – Entity Name and Type

The filing entity being formed is a nonprofit corporation. The name of the entity is:

B-1B.org

Article 2 – Registered Agent and Registered Office

(Select and complete either A or B and complete C)

☐ A. The initial registered agent is an organization (cannot be entity named above) by the name of:

OR

☑ B. The initial registered agent is an individual resident of the state whose name is set forth below:

Darin	A	Defendorf	
First Name	*M.I.*	*Last Name*	*Suffix*

C. The business address of the registered agent and the registered office address is:

1409 Riata Rd	Abilene	TX	79602
Street Address	*City*	*State*	*Zip Code*

Article 3 – Management

The management of the affairs of the corporation is vested in the board of directors. The number of directors constituting the initial board of directors and the names and addresses of the persons who are to serve as directors until the first annual meeting of members or until their successors are elected and qualified are as follows:

A minimum of three directors is required.

Director 1					
First Name	*M.I.*	*Last Name*			*Suffix*
Street or Mailing Address	*City*		*State*	*Zip Code*	*Country*

Director 2			
First Name	*M.I.*	*Last Name*	*Suffix*

Street or Mailing Address	*City*	*State*	*Zip Code*	*Country*

Director 3			
First Name	*M.I.*	*Last Name*	*Suffix*

Street or Mailing Address	*City*	*State*	*Zip Code*	*Country*

OR

☑ The management of the affairs of the corporation is to be vested in the nonprofit corporation's members.

Article 4 – Membership

(See instructions. Do not select statement B if the corporation is to be managed by its members.)

☑ A. The nonprofit corporation shall have members.

☐ B. The nonprofit corporation will have no members.

Article 5 – Purpose

(See instructions. This form does not contain language needed to obtain a tax-exempt status on the state or federal level.)

The nonprofit corporation is organized for the following purpose or purposes:

"B-1B.org" is an affiliation of individuals brought together by association with the B-1B Lancer. It's mission is to promote and preserve the legacy of the B-1B and the contributions it has made to national defense, and will act as the governing agency to oversee the planning/execution of periodic reunions.

The following text area may be used to include any additional language or provisions that may be needed to obtain tax-exempt status.

Supplemental Provisions/Information

(See instructions.)

Text Area: [The attached addendum, if any, is incorporated herein by reference.]

Organizer

The name and address of the organizer:

Darin A. Defendorf
Name

1409 Riata Rd	Abilene	TX	79602
Street or Mailing Address	*City*	*State*	*Zip Code*

Effectiveness of Filing (Select either A, B, or C.)

A. ☑ This document becomes effective when the document is filed by the secretary of state.

B. ☐ This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: _____

C. ☐ This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

The following event or fact will cause the document to take effect in the manner described below:

_____

_____

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: 11 September 2009

_____
Signature of organizer

Comptroller of Public Accounts FORM AP-204-2 (Rev.1-09/7)

(512) 495-1598

TEXAS APPLICATION FOR EXEMPTION – FEDERAL AND ALL OTHERS

• *Remove All Staples* • *TYPE OR PRINT* • *Do NOT write in shaded areas.*

1. Organizations applying for exemption under one of the categories listed below should check the appropriate box and complete this application.

Our publication, *Guidelines to Texas Tax Exemptions (96-1045)*, includes a description of the additional documentation required for each category of exemption. For the category you select, be sure to read the requirements listed in the publication. **If you send in an application without including the documentation described in the publication, we will return the application to you with a request for additional information.** *We are unable to process incomplete applications.*

- ☐ Federal Exemption under qualifying Internal Revenue Code Section 501(c)
- ☐ Cemetery Corporations
- ☐ Certain Insurance Corporations for Farm Mutuals, Local Mutual Aid Associations and Burial Associations
- ☐ Certain Insurance Corporations Licensed as Title Insurance Companies and Title Insurance Agents
- ☐ Certain Corporations Subject to the Insurance Code
- ☐ Chambers of Commerce
- ☐ Convention and Tourist Promotional Agencies
- ☐ Cooperative Associations
- ☐ Cooperative Credit Associations
- ☐ Corporations Exempted by Another Law
- ☐ Corporations with Business Interest In Solar Energy Devices
- ☐ Corporations Organized for Agricultural Purposes
- ☐ Corporations Organized for Conservation Purposes
- ☐ Corporations Involved with City Natural Gas Facility
- ☐ Corporations Organized to Provide Cooperative Housing
- ☐ Corporations Organized to Provide Convalescent Homes for Elderly
- ☐ Corporations Organized for Student Loan Funds or Student Scholarship Purposes
- ☐ Credit Unions - Federal
- ☐ Credit Unions - State
- ☐ Development Corporations
- ☐ Electric Cooperatives
- ☐ Emergency Medical Service Corporations
- ☐ Farmers Cooperative Societies
- ☐ Health Facility Development Corporations
- ☐ Hospital Laundry Cooperative Associations
- ☐ Housing Finance Corporations
- ☐ Local Organizing Committees
- ☐ Lodges
- ☐ Marketing Associations
- ☐ Nonprofit Water Supply Corporations
- ☐ Open-End Investment Companies
- ☑ Corporations Organized to Promote County, City or Another Area (Public Interest Organizations)
- ☐ Railway Terminal Corporations
- ☐ Recycling Operations
- ☐ Telephone Cooperatives
- ☐ Volunteer Fire Departments
- ☐ Youth Athletic Organizations

2. ORGANIZATION NAME
(Legal name as provided on Articles of Incorporation, or if unincorporated, the governing document.)

B-1B.org

3. ORGANIZATION MAILING ADDRESS
Street number, P.O. Box or rural route and box number

1409 Riata Rd

City	State/Province	ZIP Code	County *(or country, if outside the U.S.)*
Abilene	TX	79602	Taylor

4. Texas taxpayer number (if applicable) 32040345251

5. Federal Employer Identification Number (EIN) *(Required if applying for exemption on the basis of a federal exemption)* 271461202

6. a) Enter filing information issued by the Texas Secretary of State:

File Number ..... 801173674 File Date ..... Month 09 Day 22 Year 2009

OR

b) ☐ Check this box if this organization is not registered with the Texas Secretary of State.

7. Contact information of the person submitting this application

Name	E-mail Address
Darin A. Defendorf	ddefendorf@suddenlink.net

Firm or Company Name	Daytime Phone *(Area code and number)*	Extension
B-1B.org	(325) 518-0892	

Address	City	State	ZIP Code
1409 Riata Rd	Abilene	TX	79602

We will notify you by e-mail when the exemption has been added to let you know where the exemption can be verified online. If an e-mail address is not provided, indicate where our response should be mailed: ☑ organization's mailing address or ☐ mailing address of the submitter.

Internal Revenue Service
United States Department of the Treasury

EIN Assistant

Your Progress: 1. Identity 2. Authenticate 3. Addresses 4. Details **5. EIN Confirmation**

Congratulations! Your EIN has been successfully assigned.

EIN Assigned: **27-1461202**

Legal Name: **B-1B-ORG**

IMPORTANT:

Save and/or print this page and the confirmation letter below for your permanent records.

The confirmation letter below is your official IRS notice and contains important information regarding your EIN.

CLICK HERE for Your EIN Confirmation Letter Help with saving and printing your letter

Once you have saved or printed your letter, click "Continue" to get additional information about using your new EIN. Continue >>

Help Topics

- What if I do not have access to a printer at this time?
- Can I access this letter at a later date?