

## REMEMBER TO INCLUDE:

1. Two (2) Copies of your proposed certificate of incorporation. This document **must** have specific purposes within the document in the purpose clause. IF there is no purpose clause, please add an extra paragraph with this information before the signature. Please read the disclaimers in Question 4 of the Frequently Asked Questions and if any apply to your corporation/company, please include them in the purpose containing the purposes.
2. A cover letter with complete contact information.
3. A stamped self-addressed envelope.
4. The appropriate check-\$10 for a nonprofit or \$20 for a business – made payable to NYS Education Department.
5. The completed consent form.

STATE OF NEW YORK  
THE STATE EDUCATION DEPARTMENT  
Albany, New York

**CONSENT TO FILING WITH THE DEPARTMENT OF STATE  
(General Use)**

Consent is hereby given to the filing of the annexed certificate of incorporation

of \_\_\_\_\_,  
[name of entity]

pursuant to the applicable provisions of the Education Law, the Not-for-Profit Corporation Law, the Business Corporation Law, the Limited Liability Company Law or any other applicable statute.

This consent is issued solely for purposes of filing the annexed document by the Department of State and shall not be construed as approval by the Board of Regents, the Commissioner of Education or the State Education Department of the purposes or objects of such entity, nor shall it be construed as giving the officers or agents of such entity the right to use the name of the Board of Regents, the Commissioner of Education, the University of the State of New York or the State Education Department in its publications or advertising matter.

IN WITNESS WHEREOF this instrument is executed and the seal of the State Education Department is affixed.

RICHARD P. MILLS  
Commissioner of Education

By:

Commissioner's authorized designee

\_\_\_\_\_  
Date

**THIS DOCUMENT IS NOT VALID WITHOUT THE SIGNATURE OF THE  
COMMISSIONER'S AUTHORIZED DESIGNEE AND THE OFFICIAL SEAL OF THE  
STATE EDUCATION DEPARTMENT.**