MINNESOTA SECRETARY OF STATE



CERTIFICATE OF ASSUMED NAME

SECRETARY OF STATE

Minnesota Statutes Chapter 333

Read the directions on reverse side before completing. Filing fee: \$25.00 The filing of an assumed name does not provide a user with exclusive rights to that name. The filing is required for consumer protection in order to enable consumers to be able to identify the true owner of a business. PLEASETYPE OR PRINT LEGIBLY IN BLACK INK FOR MICROFILMING PURPOSES. State the exact assumed name under which the business is or will be conducted: (one business name per application) 2 State the address of the principal place of business. A complete street address or rural route and rural route box number is required; the address cannot be a P.O.Box. List the name and complete street address of all persons conducting business under the above Assumed Name. Attach additional sheet(s) if necessary. If the business owner is a corporation, provide the legal corporate name and registered office address of the corporation. Name (please print) 3928 11th Ave. S., Minneapolio I certify that I am authorized to sign this certificate and I further certify that I understand that by signing this certificate, I am subject to the penalties of perjury as set forth in Minnesota Statutes section 609.48 as if I had signed this certificate under oath. Signature (ONLY one person listed in #3 is required to sign.)

05920807 Rev. 11/98



MINNESOTA SECRETARY OF STATE **ANNUAL REGISTRATION MINNESOTA** NONPROFIT CORPORATION

1305

Minnesota Statutes Chapter 317A

E ANNUAL REGISTRATION MUST BE FILED NO LATER THAN DECEMBER 31 OF EACH YEAR.

1. Corporate Charter Number 7975	PLEASE READ ALL INSTRUCTIONS BELOW
2. Corporate Name Minnesota Science Fiction Society	A pre-printed Annual Registration is sent to the registered office address on file with the Secretary of State before July of each year
3. Registered Office Address (Complete street address, or rural route and rural route box number.) Clo Scott RAUN 3928 11th Ave. 5. Minneapolis MN 55407	Items 1 through 4, if pre-printed list the information currently on file with the Office of the Secretary of State. If Items 2 through 4 are no longer current, you must complete the amendment of articles of incorporation found on the reverse side of this form and pay the applicable fee.
Registered Agent (required only if an agent is listed in the original articles of incorporation or subsequent amendments)	Complete items 5 through 7, and sign below.
5. Name of corporate president: (please print) (The corporate powho signs documents on behalf of the corporation.) MARGO	resident is the person in charge of day to day activities, meetings and/or BRATTON
Does this corporation own, lease, or have any financial interesting Minnesota? (check one) YES	est in agricultural land or land capable of being farmed in
7. Name and daytime telephone number of contact person for the Geri Sullivani	he corporation: (U12) 825-3558
Signature of authorized officer or representative	
GER 75 Mivos Signature Mender, Board of Directors	June 24, 1999 Date
nere is no fee for filing the Annual Registration; however, and standing and will require a \$25.00 reinstatement fee. Failure in the statutory dissolution of the corporation by the S	re to file an Annual Registration for three consecutive years

If you have any questions, please contact the Secretary of State's office at (651)296-2803.

STATE OF MINNESOTA DEPARTMENT OF STATE FILED

Return this form to:

Secretary of State/Records Processing Section

180 State Office Building 100 Constitution Ave. St. Paul, MN 55155-1299

NO FEE ICR 317A821SUBD1B JUL 1 2 1999

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07921053 Rev. 9/98