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SECRE IARY OF STATE
TALLAHASSEE FLORIDA

11/6



COVER LETTER

TO:	 New Filing Set Division of Ce 						
SUBJ	ECT:	New Century Name of Corporat	Education Foundation – must include suffix	n Inc.			
Dear S	Sir or Madam:						
"Certi:	ficate of Existenc		Standing" and check are subm	tion to Conduct its Affairs in Florida' nitted to register the above referenced			
Please	return all corresp	oondence concerning this m	atter to the following:				
			James Griffin	<u>.</u> .			
			Name of Person				
		New Centu	ry Education Foundation	lnc			
			Firm/Company				
			PO Box 43052				
			Address				
			lontclair, NJ 07043				
		С	ity/State and Zip Code				
		jgriffin@newcer	nturyeducation.org				
	E-m		future annual report notificat	ion)			
For fu	rther information	concerning this matter, plea	ase call:				
		Griffin at of Person	(973) 746 Area Code & Daytime Tel	-0990 ephone Number			
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327			STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building				
	Tallahassee, FL	,	2661 Executiv Tallahassee, F	e Center Circle L 32301			
Enclos	ed is a check for	the following amount:					
₹] \$70	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy			

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(Name of corporation: must include the word "INCORPORATION" or Words or abbreviations of like import in language as will clearly inclinate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.) 2. New Jersey (State or country under the law of which it is incorporated) 4. 1/6/2012 (Date of Incorporation) 6. August 1, 2012 (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.) 7. 530 Grove Street Montclair, NJ 07043 (Principal office address) PO Box 43052 Montclair, NJ 07043 (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: NRAI Services, Inc. Office Address: 515 East Park Avenue Tallahassee (City) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, thereby accept the applicative to the proper and and agree to earl in this cappication, the representation of the place and statutes registered agent and agree to earl in this cappication, the representation of the statutes registered agent and agree to earl in this cappication of the place agent and the statutes registered agent and agree to perform a statute for the proper and complete performance of my different and agree to proper and complete to performance of my different and agree to perform and agree to perform and agree to perform a statute of the proper and complete to performance of my different and agree to perform and agree to perform and agree to perform and agree to perform a statute of the proper and complete to performance of my different and agree to perform a statute of the proper and complete to perform and agree to perform a statute of t	1.	New Century Educ	ation F	oundation	on Incor	porated			
4	(Name of corpo import in langu- in the name at p	oration: must include the word "INCORF age as will clearly indicate that it is a co present. "Company" or "Co." may not be	ORATED poration in used as a	" or "CORPO nstead of a na corporate suf	ORATION" atural perso fix by a nor	or words or ab n or partnership profit corporat	breviation if not so ion.)	ns of like contained	
4	2	New Jersey	3.		45	-4211622			
August 1, 2012 (Date first conducted affairs in Florida if prior to registration. See sections 617:1501. & 617:1502. F.S. to determine penalty liability.) 7. 530 Grove Street Montclair, NJ 07043 (Principal office address) PO Box 43052 Montclair, NJ 07043 (Current mailing address) 8. To provide educational interventions and support services to At-Risk, Special Needs, and Address (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: NRAI Services, Inc. Office Address: 515 East Park Avenue Tallahassee , Florida 32301 (City) (Zip Code) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent. NRAI Services, Inc. By: Jessica Cox, Assistant Secretary		· ·							
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11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS					
Chairman: James Gri	ffin				
Address: 530 Grove	Street				_
Upper Mon	tclair, NJ 07043			<u></u>	
Vice Chairman: S. Dav	vid Harrison				
Address: 275 Madiso	on Ave. #500		<u></u>		
New York, I	NY 10016				
Director: James McC	Carren				<u>,</u>
Address: 134 Hillside	Avenue				
Glen Ridge	, NJ 07028				
Director:					
Address:		·			
		· · · · · · · · · · · · · · · · · · ·			-
B. OFFICERS					
President: James Grif	ffin				
Address: 530 Grove	Street	SE	7		
Upper Mon	tclair, NJ 07043	. A.S.	NO.	Figure	• 3 • 1 ,
Vice President:		SS	72	\$	25,
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Secretary: S. David H	larrison	⋝ ™	ω 	55	
Address: 275 Madiso	n Ave. #500 New York, NY 10016				
Treasurer: James Mc	Carren				
Address: 134 Hillside	Ave. Glen Ridge, NJ 07028				
NOTE: If necessary,	you may attach an addendum to the application listing add	ditional officers and/o	r direc	ctors.	
13(Signature of	of Chairman, Vice Chairman, or any officer listed in num	ber 12 of the applicati	ion)	····	_
14.	James Griffin				_
	(Typed or printed name and capacity of person signing	application)			_

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES

NEW CENTURY EDUCATION FOUNDATION, INC.

0101019644

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Non Profit Corporation was registered by this office on January 6, 2012.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

James I. Griffin Iv 530 Grove Street Upper Montclair, NJ 08540



Certification# 125837024

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 24th day of August, 2012

Andrew P Sidamon-Eristoff

State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp