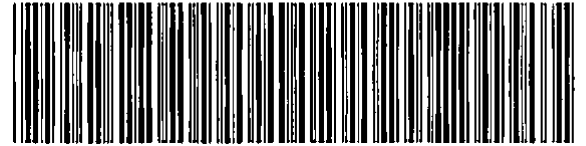


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JSI Research and Training Institute, Inc.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Elizabeth Alves, c/o Controller

Name of Person

JSI Research and Training Institute, Inc.

Firm/Company

44 Farnsworth Street

Address

Boston, MA 02210

City/State and Zip Code

controller@jsi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth Alves

703

528-7474

at ()

Name of Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$70.00 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:

1. ISI Research and Training Institute, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate 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.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Massachusetts 3. 04-2679824
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 11, 1979 5.
(Date of Incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 44 Farnsworth Street; Boston, MA 02210
(Principal office street address)

(Current mailing address, if different)

8. Public health mgmt consulting and research dedicated to improving the health of individuals and communities worldwide.
(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: InCorp Services, Inc.
Office Address: 17888 67th Court North
Loxahatchee, Florida 33470
(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.

[Handwritten Signature] Jennifer Sharp on behalf of InCorp Services, Inc.
(Registered agent's signature)

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.

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Joel H. Lamstein

Vice Chairman Address: 45 Pine Crest Road

Director Newton, MA 02459

President _____

Vice President _____

Secretary Treasurer

Other: CEO Other: _____

Chairman Name: Alexander K. Baker

Vice Chairman Address: 125 B Street, #4C

Director Boston, MA 02127

President _____

Vice President _____

Secretary Treasurer

Other: COO Other: _____

Chairman Name: Patricia Fairchild

Vice Chairman Address: 5 Circuit Drive

Director Warren, RI 02885

President _____

Vice President _____

Secretary Treasurer

Other: Clerk Other: _____

Chairman Name: Carolyn Cantlay Hart

Vice Chairman Address: 5534 18th Road North

Director Arlington, VA 22205

President _____

Vice President _____

Secretary Treasurer

Other: _____ Other: _____

2018 JUL -3 PM 12:14
 CLERK
 STATE OF FLORIDA
 DEPARTMENT OF STATE
 1000 BANKERS BUILDING
 TALLAHASSEE, FL 32399-0000

Chairman Name: Joanne B. McDade

Vice Chairman Address: 10 Walton Street

Director Billerica, MA 01862

President _____

Vice President _____

Secretary Treasurer

Other: Assistant Clerk Other: _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

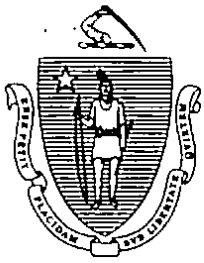
Secretary Treasurer

Other: _____ Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. [Signature]
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Carolyn Hart, Vice President
 (Typed or printed name and capacity of person signing application)



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

June 28, 2019

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office

JSI RESEARCH AND TRAINING INSTITUTE, INC.

is a domestic corporation organized on **April 11, 1979 (Chapter 180)**.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 180 section 26A, for revocation of the charter of said corporation; that the State Secretary has not received notice of dissolution of the corporation pursuant to Massachusetts General Laws, Chapter 180, Section 11, 11A, or 11B; that said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin
Secretary of the Commonwealth