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SECRETARY OF STATE OF CORPORATIONS

## TRANSMITTAL LETTER

TO: Registration Section

Division of Corporations

SUBJECT: THE MUSEUM of VEWISH HERITAGE A LIVING MEMORIAL TO THE (Name of Corporation - must include suffix) Hoccast, Inc.			
Dear Sir or Madam:			
The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", 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:			
Journ A. Neuson CFO. (Name of Person)			
The Moseum of Liver Heritage (Firm/Company)			
A Living Marmariae To THE HOLOGAST			
36 BATTERY PLACE (Address)			
New York NY 10286 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Person) at (646) 437 - 4260 (Name of Person) (Area Code & Daytime Telephone Number)			
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following amount:			
☐ \$70.00 Filing Fee			

Certificate of Status

Certified Copy

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:

I. Moseum of Jewish Registre— A Living Memorine To The Houghout Information (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so cont in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)	1C. like ained
2. New York  (State or country under the law of which it is incorporated)  3. 13-3376265  (FEI number, if applicable)	
4. 4-37-84 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual	*)
6. Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty li	ability.)
7. 36 BATTERY PLACE NEW YORK NY (Principal office address)	
36 Britishy Pence New York NY (Current mailing address)	_
8. In Educate people of Al Ass and Backgrouns About 30 Century Jewis (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  History, Pefore, Doring and Area The Holocaust.  9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CT Corporation  Office Address: 1200 South Pine Island Ro.  Cantagory Jewis  Proposition  Florida 33329  (City)  (Zip Code)	<del>-</del>
10. Registered Agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the designated in this application, I hereby accept the appointment as registered agent and agree to act in this cafurther agree to comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent.	nacite I
Sohan Dindyal  Sohan Dindyal  Wice President  11. Attached is a Certificate of Existence duly authenticated, not more than 90 days prior to delivery of this appropriate than 90 days prior to delivery of the 90 days prio	sliggeiss to
the Department of State, by the Secretary of State or other official having custody of corporate records in the	meauon to le

jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: A. DIRECTORS M. Morgenthau George Vice Chairman: David mar well BARSKY Address: **B. OFFICERS** Address: Vice President: Address: Jeffrey E. Tabak C/A MUSEUM OF JEWISH HERITAGE NEW YORK MY 10200 Weiner Walter

Address: % Museum of Lines Represe New York, My 16280.

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. 10010 G. Mor Well, PhD Director (Typed or printed name and capacity of person signing application)



STATE OF NEW YORK )

: ss.:

COUNTY OF ALBANY )

1, Kathy A. Ahearn, Counsel and Deputy Commissioner for Legal Affairs for the New York State Education Department, hereby certify that the Museum of Jewish Heritage: A Living Memorial to the Holocaust, located in the city, county, and state of New York, was incorporated by action of the Board of Regents by the issuance of a provisional charter under the corporate name "New York City Holocaust Memorial Museum" on April 27, 1984; that such provisional charter was amended by Regents action on May 23, 1986 to change the corporate name to "The Museum of the Jewish Heritage" and on April 22, 1988 to change the corporate name to "A Living Memorial to the Holocaust: Museum of Jewish Heritage"; was extended by Regents action on June 16, 1989 and April 29, 1997 and was further amended by Regents action on April 21, 1998 and on June 17, 2003 to change the corporate name to "Museum of Jewish Heritage: A Living Memorial to the Holocaust"; that the period for which such corporation was created is perpetual; that no certificate or order of dissolution of such corporation has been filed or issued; and that such corporation is currently authorized to do business in the State of New York.

IN WITNESS WHEREOF, I hereunto set my hand and affix the seal of the University of the State of New York and of the State Education Department at the City of Albany, New York on this 19<sup>th</sup> day of May, 2005.

Kathy A. Ahearn

Counsel and Deputy Commissioner

For Legal Affairs