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COVER LETTER

TO:	Registration S Division of C			
SURI	ECT: National	Mah Jongg League Inc.		
0000	DC1	Name of Corporat	ion – must include suffix	
Dear S	ir or Madam:			
Affairs	s in Florida", "C	ation by Foreign Not for Prof Pertificate of Existence", or "C renced not for profit corporat	Certificate of Status" and cl	heck are submitted to
Please	return all corres	spondence concerning this ma	atter to the following:	13 P
	Jennife	r Koo, Esq.		FS TO
		Name o	of Person	PH 12: 20 OF STATE EF, FLORID
	Sales T	ax Defense LLC		0 0 A
	-	Firm/0	Company	
	673 De	er Park Ave		
		Ad	dress	
	————			
	jkoo@S	City/State a alesTaxDefense.com	ind Zip Code	
	E-	mail address: (to be used for	future annual report notific	eation)
For furt		concerning this matter, plea	•	
Jennifer	r Koo, Esq.	at (631 491-1500 ext 16	6
	Name	of Person	Area Code Daytime Te	lephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corpora The Centre of Tallal 2415 N. Monroe Str Tallahassee, FL 323	itions hassee reet, Suite 810	
Enclose	d is a check for	the following amount:		
Please m ■ \$70.0	iake check payab 00 Filing Fee	le to: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	NT OF STATE ☐\$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:

		nate corporate name adopted for the purp	ose of transactin	g business	in Florida	a)
New York		12 100/642				•
(State or cou	untry under the law of which i		number, if applic	able)		_
09/10/1937		5.				
(1	Date of Incorporation)	5. (Date of d	luration, if other	than perpet	<u>(ipl)</u>	_
					5 R	
Date first cond	lucted affairs in Florida if prior	r to registration. See sections 617,1501 & (617.1502. F.S. to	delermine n	sinalty lia	l t hilim
				· σ.: -	٠, ١	-
130 /til Ave, I	New York, NY 10123	7		E -		<u> 4</u>
		(Principal office street address)		7	X _	
				SIA	<u>ن</u> ز	J
		(Current mailing address, if different)	 	RE T	<u>.</u>	
Pramote, deve Purpose(s) of	lop, and standarize the game corporation authorized in hor	of Mah Jongg ne state or country to be carried out in th	e state of Florid	a)		_
Vame and <u>str</u>	eet address of Florida regi	stered agent: (P.O. Box NOT accepta	ıble)			
	Hubco Registered Agent Ser	vices, Inc.				
Name:			· · · · · · · · · · · · · · · · · · ·			
	155 Office Plaza Dr. 1st Fl					
	155 Office Plaza Dr. 1st Fl Tallahassee	Florida 32301				
	155 Office Plaza Dr. 1st Fl	, Florida- ³²³⁰¹	(Zip Code)			

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

A. DIRECTO							
□Chairman	Name:	□ Chairman	Name:				
□Vice Chairman	89 Bayview Ave Address:	□Vice Chairman	Address: 84 Bonne Way				
□Director	Great Neck, NY 11021	□Director	Allendale, NJ 07401				
President		□President					
□Vice President		■Vice President					
Secretary	☐Treasurer	☐ Secretary					
Other:	☐ Other:	□Other:	ALL Coder				
□Chairman □Vice Chairman □Director	Name:	□Chairman □Vice Chairman □Director	Name: DF S ATE Address: PURIDA				
☐ President		□President					
□Vice President		☐ Vice President					
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer				
Other:	Other:	□Other:	Other:				
□Chairman □Vice Chairman	Name:	□Chairman	Name:				
□Director		Director	Addition.				
□President		□President					
□Vice President		□Vice President					
☐ Secretary	☐Treasurer	☐ Secretary	□Treasurer				
Other:	Other:	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 bradded to the index when filing your Florida Department of State Annual Report form. (Signature of Chairman, Vice Clairman, or any officer listed in number 12 of the application) Aux. EV. C. UNGER, President (Typed or printed name and capacity of person Signing application):							

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of NATIONAL MAH JONGG LEAGUE, INC. was filed on 10/29/1937, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



2020 MAR 13 PM 12: 20

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 28th day of January two thousand and twenty.

Brandon C Higher

Brendan C Hughes
Executive Deputy Secretary of State