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	(Requestor's Name)
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	(Business Entity Name)
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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:

05/17/2021

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Acc#I20160000072

Name:	News Communications, Inc.
Document #:	
Order #:	13681143

Certified Copy of Arts & Amend:	
Plain Copy:	
Certificate of Good Standing:	
Certified Copy of	
Apostille/Notarial	Country of Destination:
Certification:	Number of Certs:

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Document	Amount: \$ 78.75
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	Thank you!

COVER LETTER

TO: **Registration Section** Division of Corporations

News Communications, Inc. SUBJECT: Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Cary C. Haney
Name of Person
Crowell & Moring LLP
Firm/Company
1001 Pennsylvania Avenue, NW
Address
Washington, DC 20004
City/State and Zip code
chaney@crowell.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Pollock Name of Person at (<u>212</u>) <u>895-4216</u> Area Code Daytime Telephone Number

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:

□ \$70.00 Filing Fee

□ \$78.75 Filing Fee & Certificate of Status MAILING ADDRESS:

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

🕱 \$78.75 Filing Fee & Certified Copy

□ \$87.50 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

News Communications, Inc.

1.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")

Nevac	la	3		
Nevada 3. (State or country under the law of which it is incorporated)			(FEI number, if a	pplicable)
May 2	20, 1986	5		
(Date	of incorporation)		(Date of duration, if othe	er than perpetual)
			rida, if prior to registration) F.S., to determine penalty liab	ility)
	501 Madison Aven	ue, Suite 704 <u>, N</u>	ew York City, NY 1002	2
		(Principal o	ffice address)	
	······	(Current mailing ac	dress, if different)	
Name and <u>stree</u>	et address of Florida register	ed agent: (P.O. B	ox <u>NOT</u> acceptable)	2 1 21 hAy
Name:	C T Corporation System		-	
ice Address:	1200 South Pine Island Road	:l 	_	
	Plantation,			- <u>-</u> <u>-</u>
			(Zip code)	

9. 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.

C T Corporation System Kallin A Ulillor By: (Registered agent's signature)

10. 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.

. 11. Names and business addresses of officers and/or directors:

A. DIRECTORS

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Chairman:	James A. Finkelstein
Address:	501 Madison Avenue, Suite 704
	New York City, NY 10022
Vice Chairman:	
Director:	
Address:	
Address:	
B. OFFICEI	3
President:	James A. Finkelstein
Address:	501 Madison Avenue, Suite 704
	New York City, NY 10022
Vice President:	
Address:	
Secretary:	Viktoria Plyam
Address:	501 M. F. A. Louis, Solida 704, Mart City, NV 10022
Treasurer:	
Address:	
NOTE: If ne	cessary, you may attach an addendum to the application listing additional officers and/or directors.
12.	/s/ James A. Finkelstein
The officer or are true and the	Signature of Director or Officer director signing this document (and who is listed in number 11 above) affirms that the facts stated herein hat he or she is aware that false information submitted in a document to the Department of State constitutes felony as provided for in s.817.155. F.S.
13	James A. Finkelstein
	(Typed or printed name and capacity of person signing application)

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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NEWS COMMUNICATIONS, INC.** as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 05/20/1986, and is in good standing in this state.



Certificate Number: B202105141671297 You may verify this certificate online at http://www.nvsos.gov IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 05/14/2021.

Barbara K. Cegarste

BARBARA K. CEGAVSKE Secretary of State

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