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### **COVER LETTER**

_	vision of Corporations			
NID IE CT	JEWISH NEWS SERVICE, INC.			
SUBJECT	Name of Corpor	ration – must in	iclude suffix	
Dear Sir or	Madam:			
Affairs in F	ed "Application by Foreign Not for Pr lorida", "Certificate of Existence", or above referenced not for profit corpor	"Certificate of	Status" and ch	eck are submitted to
Please retur	n all correspondence concerning this	matter to the fo	ollowing:	
	Amelia Katzen			
	Nam	e of Person		
	Jewish News Service, Inc.			
	Firm	n/Company		
	831 Beacon Street, Suite 272			
		<del></del>		
		4 1 1		
	<i>I</i>	Address		· ;
	Newton, MA 02459			
	City/Stat	e and Zip Code	2	
	office@jns.org			
	E-mail address: (to be used for	or future annua	il report notifica	ntion)
For further i	information concerning this matter, pl	lease call:		
Amelia Kata	yan	617	755-5552	
——————————————————————————————————————		it ()	Dougima Tal	ephone Number
	Name of Person	Area Code	Daytime Tel	ephone Number
	ling Address:		Address:	
	Registration Section Registration Section			tions
	Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee			
	P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810			
141	ianassee, 1 is 52514		assee, FL 323	
	a check for the following amount:			
	check payable to: FLORIDA DEPART!			C. 607 50 P
■ \$70.00 F	iling Fee □\$78.75 Filing Fee & Certificate of Status		Filing Fee & ied Copy	☐\$87.50 Filing Fee.  Certificate of Status &
	Certificate of Status	Com	ica copy	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:

(II Haine didi	ailable in Florida, enter alternate corpora	te name adopted for the purpose of transacting busines	s in Florida)
Massachusett	TS.	3 45-0949784	
(State or cou	intry under the law of which it is incorpor	rated) 45-0949784 (FEI number, if applicable)	
05/05/2011	•	5 NA	
(1	Date of Incorporation)	5. NA (Date of duration, if other than perp	etual)
Date first cond	lucted affairs in Florida if prior to registrati	F.S. 617.1501. on. See sections 617.1501 & 617.1502, F.S. to determine	: penalty liabili
831 Beacon S	treet, Suite 272, Newton, MA 02459	pal office street address)	
	(Princi)	pai office <u>street</u> address)	
NΛ			
	(Current n	nailing address, if different)	(2)
JNS's purpose	is to educate its readers with accurate ne	ws and analysis about Israel, Judaism and the Middle	East.
Purpose(s) of	corporation authorized in home state or c	ws and analysis about Israel, Judaism and the Middle country to be carried out in the state of Florida)	East.
			نن
	reet address of Florida registered agen		
	Influence Landers		
Name:	Jenrey Lasker		 -
fice Address:	6774 Willow Wood Dr. #1105		1
	Boca Raton	, Florida 33434 (Zip Code)	
	(City)	(Zin Code)	

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. DIRECTOR			
□Chairman	Joshua Katzen Name:	□Chairman	Name: Russel Pergament
□Vice Chairman	Address:	□Vice Chairman	Address: 831 Beacon Street, Suite 272
Director	Newton, MA 02459	■Director	Newton, MA 02459
President		□President	
□Vice President		■ Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
Other:	Other:	□Other:	□Other:
□Chairman	Amelia Katzen	□ Chairman	Name: Daniel Farb
□Vice Chairman	Address: 831 Beacon Street, Suite 272		Address: 831 Beacon Street, Suite 272
■Director	Newton, MA 02459	<b></b>	Newton, MA 02459
□President		□President	
□Vice President		□Vice President	The state of the s
<b>■</b> Secretary	□Treasurer	☐ Secretary	■ Treasurer
Other:	☐ Other:	Other:	□Other:
			%) •
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	_
□Director		Director	
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	Secretary	□Treasurer
Other:	☐ Other:	□Other:	Other:
Non-indexed indiv	t Notice: Use an attachment to report more the viduals may be added to the index when filing (Signature of Chairman, Vice Chairman, or a en, Clerk/Secretary	g your Florida Department o	f State Annual Report form.  12 of the application)



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

Date: December 21, 2022

To Whom It May Concern:

I hereby certify that

#### JEWISH NEWS SERVICE, INC.

appears by the records of this office to have been incorporated under the General Laws of this

Commonwealth on May 05, 2011 (Chapter 180).

I also certify that so far as appears of record here, said corporation still has legal existence.

SISTELL SISTEL

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

Villean Trenin Gallein

on the date first above written.

Secretary of the Commonwealth

Certificate Number: 22120477360

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: mas