## F24000005304

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PłCK-UP	☐ WAIT	MAJL
	(Business Entity Name)	
<del></del> -	(Document Number)	<del></del>
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	·

Office Use Only



400437630654



007 1 6 2024 K 1570770 F.

## CT CORP

## (850) 656-4724 3458 lakesore Drive Tallahassee, FL 32312

10/10/2024

Da	ite:10/1	10/2024	· wil DW
	Ac	cc#I20160000072	4: ( ) = W
Name:	Jewish Success	Initiative, Inc.	
Document #:			
Order #:	15909989		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		ntry of Destination:	
Filing:	Certified:		Email Address for Annual Report Notifications
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier	Amount: \$ 7	78.75	

Thank you!

## 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:

				iness in Florida)
	Dolowara			
(State or cou	Delaware  try under the law of which it is incorp	3 porated)	(FEI number, if applicable)	
•	-	5. Perpetual (Date of duration, if other than		
<u> </u>	Date of Incorporation)			perpetual)
Date first cond	ucted affairs in Florida if prior to registr	ration. See section.	617.1501 & 617.1502, F.S. to deteri	mine penalty liab
1979 Marc	us Avenue, Suite C115, New	Hyde Park,	NY 11042	
	us Avenue, Suite C115, New (Prir	icipal office stree	t address)	
			<u>t</u> address)	
			_	
	(Curren	it mailing address	_	
	(Curren	it mailing address	, if different)	
A not for p			, if different)	al initiatives
A not for p	(Current Profit business organization Corporation authorized in home state of		, if different)	al initiatives
	profit business organization corporation authorized in home state of	dedicated to	, if different)  o religious and educations arried out in the state of Florida)	al initiatives
Name and str	erofit business organization corporation authorized in home state coet address of Florida registered ag	dedicated to recountry to be exgent: (P.O. Box	, if different)  O religious and educations  orried out in the state of Florida)  NOT acceptable)	al initiatives
Name and str	erofit business organization corporation authorized in home state coet address of Florida registered ag	dedicated to recountry to be exgent: (P.O. Box	, if different)  O religious and educations  orried out in the state of Florida)  NOT acceptable)	al initiatives
Name and str	erofit business organization corporation authorized in home state coet address of Florida registered ag	dedicated to recountry to be exgent: (P.O. Box	, if different)  O religious and educations  orried out in the state of Florida)  NOT acceptable)	al initiatives
Name and <u>str</u>	erofit business organization corporation authorized in home state coet address of Florida registered ag	dedicated to recountry to be exgent: (P.O. Box	, if different)  O religious and educations  orried out in the state of Florida)  NOT acceptable)	al initiatives
Name and <u>str</u>	profit business organization corporation authorized in home state of	dedicated to recountry to be exgent: (P.O. Box	, if different)  O religious and educations  orried out in the state of Florida)  NOT acceptable)	al initiatives

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.

By Stephanie Hencz, Assistant Secretary

(Registered agent's signature)

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

A. DIRECTOR	(S		
Chairman	Name: Kenneth Scharf	□ Chairman	Name:
□Vice Chairman	Address: 1979 Marcus Avenue, Suite C115	□Vice Chairman	Address:
☑Director	New Hyde Park, NY 11042	Director	
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
Other:	Other:	□Other:	□ Other:
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President	<del></del>	□President	
□Vice President		□Vice President	
□Secretary	Treasurer	☐ Secretary	□Treasurer
Other:	Other:	Other:	□Other:
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President		□President	
□Vice President		□Vice President	
Secretary	Treasurer	☐ Secretary	□Treasurer
Other:	☐ Other;	□Other:	Other:
Non-indexed indi	nt Notice: Use an attachment to report more than so viduals may be added to the index when filing you fluctuos Scharf  (Signature of Chairman, Vice Chairman, or any	ur Florida Department o	of State Annual Report form.
	77 .1 0 1	C 70.	
14	Kenneth Scha (Typed or printed name and capacity of	irt, Director person signing applicat	ion)

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JEWISH SUCCESS INITIATIVE INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF OCTOBER, A.D.

2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Authentication: 204591900

Date: 10-09-24