

F21000002388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

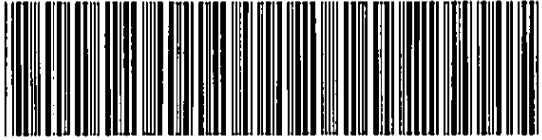
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED AND FILED

MAY 03 2021
Brumbley

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED QUALIFICATION FOR:

BANU FOUNDATION, INC.

PLEASE RETURN A CERTIFIED COPY

CHECK# 8966 FOR: \$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:

1. Banu Foundation, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 86-1580421
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/1/2020 5.
(Date of Incorporation) (Date of duration, if other than perpetual)

6.
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 20533 Biscayne Blvd #372, Miami, FL 33180
(Principal office street address)

(Current mailing address, if different)

8. Charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Brett Wood

Office Address: 20533 Biscayne Blvd #372

Miami, Florida 33180
(City) (Zip Code)

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10. 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.

[Handwritten signature of Brett Wood]
(Registered agent's signature)

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. DIRECTORS

Chairman Name: Afshin Molavi
 Vice Chairman Address: 20533 Biscayne Blvd #372
 Director Miami, FL 33180
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Anna Mehrabi
 Vice Chairman Address: 20533 Biscayne Blvd #372
 Director Miami, FL 33180
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

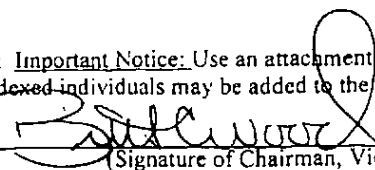
Chairman Name: Robert Fardi
 Vice Chairman Address: 20533 Biscayne Blvd #372
 Director Miami, FL 33180
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Maggie Oetgen
 Vice Chairman Address: 20533 Biscayne Blvd #372
 Director Miami, FL 33180
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: Brett Wood
 Vice Chairman Address: 20533 Biscayne Blvd #372
 Director Miami, FL 33180
 President _____
 Vice President _____
 Secretary Treasurer
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 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 be added to the index when filing your Florida Department of State Annual Report form.

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

14. Brett Wood, Director _____
 (Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BANU FOUNDATION" 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 TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2021.

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



3789357 8300C

SR# 20210614104

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202586173

Date: 02-24-21