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COVER LETTER

	ion of Corporations					
SUBJECT:	LOANINGHUB INC					
3000.01.	Name	of corporation - r	nust include suffix			
Dear Sir or M	ladam;					
"Certificate o	"Application by Foreign Co f Existence," or "Certificate iced foreign corporation to to	of Good Standir	ig" and check are sub			
Please return	all correspondence concerni	ing this matter to	the following:			
HABIBUR RA	AHMAN					
	· · · · · · · · · · · · · · · · · · ·	Name of Per	'son			
ENVISION CO	ONSULTING LLC					
		Firm/Compa	ny			
3301 BUCKE	YE RD STE 209				. 1	_
		Address			<u>_</u> , ;;;	2
ATLANTA G	A 30341				<u>.</u>	00
		City/State and	Zip code			67 100 12
ENVZON@G						
	E-mail address	s: (to be used for	future annual report i	notification)		5
For further in	formation concerning this n	natter, please cail	:		; ;	VD 3. 02
HABIB RAH	MAN	at ()	451 2524			
Nam	e of Person	Area Code	Daytime Telep	hone Number		
Regis Divis The 0 2415	EET/COURIER ADDRES stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7		
	check for the following amoreck payable to: FLORIDA Diing Fee	EPARTMENT O	F STATE 78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate of Stat 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.

06/11/2020 (Date of incorpore) - (SE	(Date first transacted busing E SECTIONS 607.1501 & 6	_ 5(Date of duration, if other than pe		
06/11/2020 (Date of incorpore	(Date first transacted busing E SECTIONS 607.1501 & 6	d) (FEI number, if applicable 5. (Date of duration, if other than pe		
- (SE	(Date first transacted busing E SECTIONS 607.1501 & 6		erpetual)	
	E SECTIONS 607.1501 & 6			
3301 Buckeye Rd Ste 209 Atl	Principal	d office street address)	 -	
	(Current n	nailing address, if different)	<i>≯</i> c	787
Name and street address of Sajid Mur Name:		(P.O. Box NOT acceptable)	20 / 10 (A T) (A T) (A T)	1 nc1 20
	CKET BLVD		, ,	77
ORLAND		, Florida <u>32824</u>		
	(City)	(Zip code)		(ب

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.

سيد - ()

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A. DIRECTORS	SHIVANI RAWAT					
□Chairman	Name. 11206 OUDNEY CT	□ Chairman	Name,			
□ Vice Chairman	Address:	□ Vice Chairman	Address:		·	
Director	RICHMOND TX 77407	□Director	~~~			
□President		□President				
□Vice President		□Vice President				
□Secretary	☐ Treasurer	☐ Secretary		☐Treasurer		
□Other		Other		Other		
,						
□Chairman	Name:	Chuirman	Name:			
□ Vice Chairman	Address:	□ Vice Chairman	Address:			
□Director		Director				
□President		President				
□Vice President		□Vice President				
□Secretary	☐Treasurer	☐ Secretary		Treasurer		
□Other	Other	□()ther		□Other	<i>*</i> (
						9
□Chairman	Name:	□ Chairman	Name:	-	3 2 3	<u>ر</u>
□Vice Chairman	Address:	□Vice Chairman	Address:		1 -	<u> </u>
□Director		□Director			· ;	
□President		□President			•••	
□Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary		□Treasurer		
□Othet	Other	□Other	.	Other		
Important Notice: Undividual may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department of Direct Signature of Direct Signature of Direct Control of Direct	irtment of State Annual Re	I for reporting port form,	ourposes only. Not	n-indexed	

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SHIVANI RAWAT

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jose A. Esparza Deputy Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for LOANINGHUB INC (file number 803646970), a Domestic For-Profit Corporation, was filed in this office on June 11, 2020.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 19, 2021.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Jose A. Esparza Deputy Secretary of State

ax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services
Document: 1072893860003



September 10, 2021

HABIBUR RAHMAN ENVISION CONSULTING LLC 3301 BUCKEYE RD STE 209 ATLANTA, GA 30341

SUBJECT: LOANINGHUB INC Ref. Number: W21000122936

We have received your document for LOANINGHUB INC and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

The Certificate of Fact from Texas states that this company is a Non-Profit company. Either provide a correct certificate of status or provide the correct foreign not for profit corporation form.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Lec'd

Letter Number: 421A00021876