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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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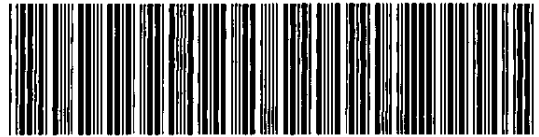
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Shavit Corporation

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," 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:

Michael Hirschhorn

Name of Person

Shavit Corporation

Firm/Company

**SUBJECT:** Shavit Corporation 23123 State Road 7, Ste 300, Boca Raton, FL 33428

Address

Boca Raton, FL 33428

City/State and Zip code

michael@cocard.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Hirschhorn at ( 954 ) 557-4404

Name of Person

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$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.

1. **Shavit Corporation**

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

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

2. **Nevada**

(State or country under the law of which it is incorporated)

3. **27-0621644**

(FEI number, if applicable)

4. **July 17, 2009**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **23123 State Road 7, Ste 300, Boca Raton, FL 33428**

(Principal office address)

**23123 State Road 7, Ste 300, Boca Raton, FL 33428**

(Current mailing address)

8. **Any Lawful Activity**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: **Michael Hirschhorn**

Office Address: **23123 State Road 7, Ste 300**

**Boca Raton**

(City)

, Florida **33428**

(Zip code)

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.*

(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.

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Robert Cohen

Address: 23123 State Road 7, Ste 300, Boca Raton, FL 33428

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Daniel Post

Address: 23123 State Road 7, Ste 300, Boca Raton, FL 33428

Vice President: 23123 State Road 7, Ste 300, Boca Raton, FL 33428

Address: \_\_\_\_\_

Secretary: Michael Hirschhorn

Address: 23123 State Road 7, Ste 300, Boca Raton, FL 33428

Treasurer: Robert Levin

Address: 23123 State Road 7, Ste 300, Boca Raton, FL 33428

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

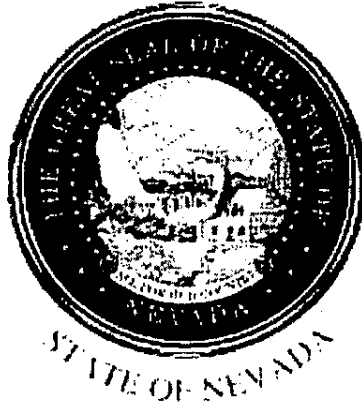
13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. MICHAEL HIRSCHHORN Secretary

(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE



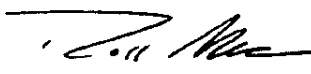
## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified 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, corporation soles, 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, **SHAVIT CORPORATION**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 17, 2009, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 20, 2009.



  
ROSS MILLER  
Secretary of State

Electronic Certificate  
Certificate Number: C20090820-0439  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>