

F09000003473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

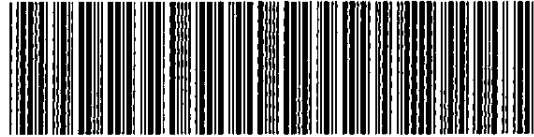
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 31 P 2:32

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D.A. WHITE

COVER LETTER

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TO: New Filing Section
Division of Corporations

2009 AUG 31 P 2:32

SUBJECT: HERSCHEL IMPORTS, Inc
Name of corporation - must include suffix

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

ANIL K. JAIN

Name of Person

HERSCHEL IMPORTS, Inc.

Firm/Company

29, ADRIANNE LAWE

Address

STATEN ISLAND, NEW YORK, NY 10303

City/State and Zip code

herschj@yahoo.com

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

For further information concerning this matter, please call:

ANIL K. JAIN

Name of Person

at (917) 650-0434

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 30, 2009

ANIL K. JAIN
HERSCHEL IMPROTS, INC.
29, ADRIANNE LANE, STATEN ISLAND
NEW YORK, NY 10303

SUBJECT: HERSCHEL IMPORTS, INC.
Ref. Number: W09000030307

We have received your document for HERSCHEL IMPORTS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Regulatory Specialist II

Letter Number: 009A00022419

DATE: 08/25/09.

① GOOD STANDING CERTIFICATE

Attached.

② Other documents (relevant) also attached.

③ Cheque for \$ 87.50 already with you.

KINDLY SEND THE REGISTRATION.

Cent

ANIL JAIN

for HERSCHEL IMPORTS INC.

PHONE: 917-650-0434

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

RECEIVED
DEPARTMENT OF STATE
09 AUG 31 PM 2:59

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. HERSCHEL IMPORTS, Inc

(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. NEW YORK

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

3. 35-2337169

(FEI number, if applicable)

4. 5/20/2008

(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. 29, ADRIANNE LANE STATEN ISLAND, NEW YORK - NY 10303

(Principal office address)

29, ADRIANNE LANE STATEN ISLAND, NEW YORK - NY 10303

(Current mailing address)

8. DISTRIBUTION OF NATURAL GONES

(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:

RAVIKRANGA GIL

Office Address:

8435 E ADAMO DR

TAMPA (FL)

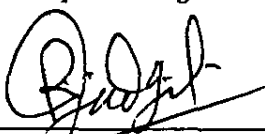
(City)

, Florida 33619

(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.

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

A. DIRECTORS

Chairman: ANIL K. JAIN

Address: 29 ADRIANNE LAWE
STATEN ISLAND NEW YORK, NY 10303.

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: RAVILKIRANGADGIL

Address: 9435E ADAM DR.
TAMPA FL 33619

Vice President: _____

Address: _____


Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. ANIL K. JAIN - CHAIRMAN
(Typed or printed name and capacity of person signing application)

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2009 AUG 31 P 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York
Department of State } ss:

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2009 AUG 31 P 2: 32

I hereby certify, that the Certificate of Incorporation of ~~HERSCHEL~~ **HERSCHEL** IMPORTS, INC. was filed on 05/20/2008, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 17th day of August two
thousand and nine.*



First Deputy Secretary of State

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