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(Address)

(Address)

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TALLAHASSEE FLORIDA

## COVER LETTER

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

**SUBJECT:** Uniquely Mia Inc.

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," or "Certificate of Good Standing" 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:

Victoria Lugli

Name of Person

Radha Consulting

Firm/Company

14300 NE 20th Ave #D102-325

Address

Vancouver, WA 98686

City/State and Zip code

victoria@radhaconsulting.com

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

For further information concerning this matter, please call:

Victoria Lugli

Name of Person

at ( 360 ) 921-4727

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

UNITED STATES OF AMERICA

# The State of Washington

## Secretary of State



I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,  
hereby issue this

### CERTIFICATE OF EXISTENCE/AUTHORIZATION OF UNIQUELY MIA INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit  
Corporation was formed under the laws of the State of WA and was issued a Certificate Of  
Incorporation in Washington on 10/3/2005.

I FURTHER CERTIFY that as of the date of this certificate, UNIQUELY MIA INC. remains  
active and has complied with the filing requirements of this office.

Date: December 6, 2013

UBI: 602-545-519

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA



Given under my hand and the Seal of the State  
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

**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. **Uniquely Mia 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. **Washington**

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

3. **20-3593474**

(FEI number, if applicable)

4. **10/03/2005**

(Date of incorporation)

5. **Perpetual**

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

6. **03/01/2014**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **14300 NE 20th Ave #D102-325, Vancouver, WA 98686**

(Principal office address)

**14300 NE 20th Ave #D102-325, Vancouver, WA 98686**

(Current mailing address)

8. **IT Consulting**

(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:

**Northwest Registered Agent LLC**

Office Address:

**3030 N. Rocky Point Dr, STE 150A**

**Tampa**

(City)

**Florida 33607**

(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.*



**Dan Keen - Manager**

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

**A. DIRECTORS**

Chairman: Victoria Lugli

Address: 14300 NE 20th Ave #D102-325, Vancouver, WA 98686

Vice Chairman: Rajesh Sridar

Address: 14300 NE 20th Ave #D102-325, Vancouver, WA 98686

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

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

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

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

**B. OFFICERS**

President: Victoria Lugli

Address: 14300 NE 20th Ave #D102-325, Vancouver, WA 98686

Vice President: Rajesh Sridar

Address: 14300 NE 20th Ave #D102-325, Vancouver, WA 98686

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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

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

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. Victoria Lugli

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