

F 15000000969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

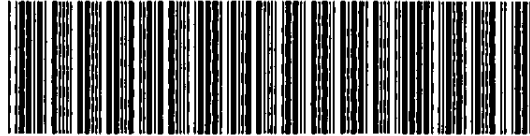
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15 MAR -9 AM 11:52

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

15 3/10/15

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SUDESH AND IQBAL MENON FOUNDATION
Name of Corporation – must include suffix INC.

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

HARSHAL MANNAN

Name of Person

SUDESH AND IQBAL MENON FOUNDATION INC

Firm/Company

P. O. BOX 610236

NORTH MIAMI BEACH

Address

FLORIDA. 33261

City/State and Zip Code

SHELLY MANNAN @ YAHOO.COM.

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

HARSHAL MANNAN

Name of Person

at (786) 603 6054

Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

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

RECEIVED

15 MAR -9 PM 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 6, 2015

HARSHAL MANNAN
13899 BISCAYNE BLVD.
PH5
NORTH MIAMI, FL 33181

SUBJECT: SUDESH AND IQBAL MENON FOUNDATION
Ref. Number: W15000000687

We have received your document for SUDESH AND IQBAL MENON FOUNDATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 215A00000201

FILED
15 MAR -9 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. SUDESH AND IQBAL MENON 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. CALIFORNIA

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

3. EIN 061702741

(FEI number, if applicable)

4. 06/27/2003

(Date of Incorporation)

5. PERPETUAL

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

6. NONE

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

7. % FINCK RUDNICK AND CO. 525 MIDDLEFIELD RD. #19, MENLO PARK, CA 94025

(Principal office address)

P.O. BOX 610236. NORTH MIAMI BEACH. FLORIDA, 33261

(Current mailing address)

8. PRIVATE NON-PROFIT CORPORATION

(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: HARSHAL MANNAN

Office Address: 13899 BISCAYNE BLVD.

NORTH MIAMI BEACH, Florida 33181

(City)

(Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Harshal Mannan

(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 addresses of officers and/or directors

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A. DIRECTORS

Chairman: A. RADIA

Address: 14 ASHLEY CT. ASHLEY LANE. LONDON NW4 1PD ENGLAND

Vice Chairman: _____

Address: _____

Director: POONAM SINGH

Address: 3829 20th St. SAN FRANCISCO. CA 94114.

Director: _____

Address: _____

B. OFFICERS

President: HARSHAL MANNAN

Address: P.O. BOX 610236. NORTH MIAMI BEACH. FLORIDA. 33261

Vice President: _____

Address: _____

Secretary: KARUNA MENON

Address: 14 ASHLEY CT. ASHLEY LANE. LONDON NW4 1PD. ENGLAND.

Treasurer: _____

Address: _____

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

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

14. HARSHAL MANNAN.
(Typed or printed name and capacity of person signing application)

State of California
Secretary of State

CERTIFICATE OF STATUS

FILED
15 MAR -9 AM 11: 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ENTITY NAME:

SUDESH & IQBAL MENON FOUNDATION

FILE NUMBER: C2542730
FORMATION DATE: 06/27/2003
TYPE: DOMESTIC NONPROFIT CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of December 16, 2014.

Debra Bowen

DEBRA BOWEN
Secretary of State