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(((H150001614193)))



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To:

Division of Corporations

Fax Number : (850)617-6383

-From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400

Fax Number : (302)645-1280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

eliranmiami@hotmail.com

## FOREIGN PROFIT/NONPROFIT CORPORATION REVO INC

| Certificate of Status | 1       |
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July 2, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations HARVARD BUSINESS SERVICES, INC.

SUBJECT: REVO INC REF: W15000045024

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp." "Inc.," "Co.," "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L11823 "REVO, INC.".

Please return 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) 245-6051.

Karen A Saly Regulatory Specialist II

FAX Aud. #: H15000161419 Letter Number: 715A00013896 JUL-07-2015 14:08 From:

(((H15000161419 3)))

## 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. l. (Emer name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") REVO BLUE INC (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable) (State or country under the law of which it is incorporated) 06/29/2015 Perpetual (Date of incorporation) (Date of duration, if other than perpetual) No business transacted prior to registration (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607, 1501 & 607, 1502, F.S., to determine penalty liability) 3565 Forest View Cir, Dania, FL 33312 (Principal office address) 3565 Forest View Cir, Dania, FL 33312 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Izak Shrita Name: 3565 Forest View Cir Office Address: Dania,

9. 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)

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.

| II. Nan       | nes and business addresses of officers and/or directors:  | (((H15000161419 3)))  |
|---------------|---|---|
| A. DIRI       | ECTORS  |   |
| Chairman      | Izak Shrira   |   |
|               | 3565 Forest View Cir, Dania, FL 33312   |   |
| . (00.00.     |   |   |
| Vice Chai     | irman;  |   |
|               |   |   |
|               |   |   |
| Director:     |   | 5 5 1   |
|               |   | The second second   |
| 7 HI (11 GOV. |   | M - ES  |
| PS            | Make the first of | <u></u>   |
|               |   |   |
| Address:      |   | 5   |
| B. OFF        | SOEDS   |   |
|               | Izak Shrira   |   |
| President:    | 3565 Forest View Cir, Dania, FL 33312   | ra er par en stromers av ment i en ever selv at skille en alle fill mely by de ybeyr i a selv an skille en skil                 |
| Address:      |   |   |
|               |   |   |
| Vice Presi    | ident   |   |
| Address:      |   |   |
|               |   |   |
| Secretary:    |   |   |
| Address:      |   |   |
| Treasurer:    |   |   |
| Address:      |   |   |
|               | If necessary, you may attach an addendum to the application listing additional officers at  | nd/or directors.  |
|               |   |   |
|               | Signature of Director or Officer  | रण गण्यासम्बद्धाः गण्यासम्बद्धाः अर्थः गण्यासम्बद्धाः स्थानसम्बद्धाः स्थानसम्बद्धाः स्थानसम्बद्धाः स्थानसम्बद्धाः सङ्घानम् सृत् |
| are truc a    | er or director signing this document (and who is listed in number 11 above) affirms that and that he or she is aware that false information submitted in a document to the Departmeter felony as provided for in s.817.155, F.S.  | the facts stated herein<br>ont of State constitutes   |
|               | Shrira, President   |   |
|               | (Typed or printed name and capacity of person signing application)  |   |

2 . . . . .

(((H15000161419 3)))

## Delaware

DAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "REVO INC" IS DULY INCORPORATED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING
AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF
THIS OFFICE SHOW, AS OF THE FIRST DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REVO INC" WAS INCORPORATED ON THE TWENTY-NINTH DAY OF JUNE, A.D. 2015.

7815 JUL -7 AH 8: 29

5775522 8300

150996956

You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTY CATION: 2517938

DATE: 07-01-15