F500004619

| (Reque | estor's Name) | | | |
|---|-------------------|--------------|--|--|
| (Addre | ss) | . | | |
| (Addre | ss) | | | |
| (City/S | tate/Zip/Phone #) | | | |
| PłCK-UP | ☐ WAIT | MAIL | | |
| (Busine | ess Entity Name) | | | |
| (Docur | nent Number) | | | |
| Certified Copies | Certificates of | Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| W5-58539 | | | | |
| 6540 Gi | 12.50 | | | |

Office Use Only



800276600518

800276600518 10/23/15--01001--006 **622.50 09/01/15--01018--022 **70.00

FILED

15 SEP -1 PM 5: 20
SECRETARY OF STATE
TALLAHASSEE, FH ORIDA

OCT 2.2 2015 S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 3, 2015

RESOLUTE LAW 808 W WATERS AVENUE TAMPA, FL 33604

SUBJECT: RAVIM INTERNATIONAL INC.

Ref. Number: W15000058539

We have received your document for RAVIM INTERNATIONAL INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$622.50.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 515A00018690

15 SEP -1 PM 5: 20 SECRETARY OF STATE

COVER LETTER

| TO: Registration Section Division of Corporati | ons | | | | |
|---|--|-----------------|---|---|-------------|
| SUBJECT: R | WIM IN | TERNA | TONA (| ~ TNC | |
| 50B0EC1: | | | | 1 | |
| Dear Sir or Madam: | | | | | |
| "Certificate of Existence," or | "Certificate of Good | Standing" an | d check are sub | | |
| Please return all corresponder | ce concerning this m | atter to the fo | ollowing: | | |
| RESOLUTS | Name | e of Person | | | |
| | Division of Corporations ECT: RAVIM INTERNATIONAL, INC. Name of corporation - must include suffix It or Madam: closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," icate of Existence," or "Certificate of Good Standing" and check are submitted to register the efferenced foreign corporation to transact business in Florida. RESOLUTE AW Firm/Company Name of Person Name of Person Address Address Address City/State and Zip code RESOLUTE AW City/State and Zip code RESOLUTE AW Address The information concerning this matter, please call: Area Code Daytime Telephone Number of Authorization of Corporations Closed "Application by Foreign Corporations P.O. Box 6327 Tallahassee, FL 32301 and is a check for the following amount: 200 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$887.50 Filing Fee, | | | | |
| 888 W. | WATERS | AVE | | | |
| TAMPA, | Fi. | 336 | 04. | | |
| RESOL E-r | 3 | | _ 1 | notification of | <u></u> |
| For further information conce | rning this matter, plea | ase call: | | CRETAR | FIL SP- |
| Name of Person | at (<u>8</u> Area | Rode 3 | 63−) Daytime Telep | 993 83 | Ş. 2 |
| Registration Section Division of Corporation Clifton Building 2661 Executive Center | ons r Circle | | Registration S Division of Co P.O. Box 6327 | ection orporations 7 | |
| Enclosed is a check for the fol | lowing amount: | | | | |
| | 78.75 Filing Fee & Certificate of Status | | Filing Fee & ed Copy | \$87.50 Filin Certificate Certified C | of Status & |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| "Inc.," "Co.," "Cor | poration; must include "INCORPORATED," p," "Inc," "Co," or "Corp.") le in Florida, enter alternate corporate name a | | |
|--|---|--|--|
| | EVADA 3. | (FEI number, if ap | |
| (State or country | | | |
| (7) | 5. | (Date of duration, if other | there are no start N |
| (Date o | fincorporation) AUGUST, 2013 | (Date of duration, if other | than perpetual) |
| | (Principe C/O RESOUTE LAW (Current mailing address of Florida registered agent: (P.O. | | Ave, TAWAR, Fr. 3 |
| Name: ffice Address: | 868 W. WATERS AV | <u></u> | P-1 I |
| | TAMPA, PSL. | , Florida <u>33(,07</u> (Zip code) | D PM 5: 20 PF STATE PFLORIDA |
| esignated in this a orther agree to con | t's acceptance: I as registered agent and to accept servi opplication, I hereby accept the appointn oply with the provisions of all statutes re niliar with and accept the obligations of | nent as registered agent and agr elative to the proper and comple | ee to act in this capacity. ete performance of my |

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Vice Chairman: CIRCLE Director: Director: **B. OFFICERS** Vice President: Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. _____ Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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

MOHAMMAD VOSOUGHT - PRESIDENT
(Typed or printed name and capacity of person signing application)

a third degree felony as provided for in s.817.155, F.S.

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, **RAVIM INTERNATIONAL INC.**, 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 11, 2013, and is in good standing in this state.

A STANDA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 27, 2015.

Ballons K. Cegarske

BARBARA K. CEGAVSKE

Secretary of State

Electronic Certificate
Certificate Number: C20150827-0250
You may verify this electronic certificate
online at http://www.nvsos.gov/

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

RAVIM INTERNATIONAL INC.

Nevada Business Identification # NV20131413465

Expiration Date: July 31, 2016

SEP -1 PM 5: 20 CRETARY OF STATE AHASSEE, FLORIDA

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 27, 2015

BARBARA K. CEGAVSKE Secretary of State

You may verify this license at www.nvsos.gov under the Nevada Business Search.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which by law <u>cannot</u> be waived.