# Florida Department of State Division of Corporations

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Account Number : 120030000066

: (561)362-9595

Phone

Fax Number : (561)362-9612

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### FOREIGN PROFIT/NONPROFIT CORPORATION DOKITA247, INC.

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# **COVER LETTER**

		ration Secon of Cor	ction porations						
SUBJE	·CT:	Dokita247							
0000		<u> </u>		of corporation	n - must	include suffix			
Dear Sir	or Ma	dam:							
"Certific	cate of	Existence	ion by Foreign C s," or "Certifical n corporation to	le of Good Str	ınding" ı	ind check are sub	ct Business in Florida," mitted to register the		
Please re Sahim Z		ll corresp	ondence concer	ning this matte	er to the	following:			
	<del></del>		·····	Name o	Person				
Dokita24	47 Inc.								
540 E. M	IcNab I	Road, Suite	e C	Firm/Co	mpany				
				Add	ress	***************************************			
Pompano	o Beach	, Florida 3	3060						
		<u> </u>		City/State	and Zip				
info@za	id-desig	ma.com							
			E-mail addres	is: (to be used	for futu	re annual report	notification)		
For furth	her info	rmation	concoming this	matter, please	call:				
Brian Pe	arlman,	Esq.		561 at (	362	-9595			
***************************************	Name	of Person	1	Area Co	de	Daytime Telep	hone Number		
	Registr Division Cliftor 2661 E	ration Sec on of Con Building	porations } Center Circle	SS:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclose	d is a c	heck for	the following an	nount:					
<b>\$</b> 70.0	00 Fili	ng Fec	C) \$78.75 Fili Certificate			75 Filing Fee & fied Copy	S87.50 Filing Pee, Certificate of Status & Certified Copy		

under the law of which it is incorporated.

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Enter name of or "Inc.," "Co.," "Co.	orporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp,")	COMPANY," "CORPORATION,"	Standard Sta			
(If name unavaila Delaware	ble in Plorida, enter alternate corporate name adoption 47.	5602024	•			
(State or country	under the law of which it is incorporated)	• • • • • • • • • • • • • • • • • • • •				
Not Applicable	of incorporation)	(Date of duration, if other than perpetual)				
·	(Date first transacted business in Flo (SER SECTIONS 607,1501 & 607,1502, and, Suite C, Pompano Beach, Florida 33060					
	(Principal o	ffice address)				
	(Current mailing as	ddross, if different)				
Name and stree	t address of Florida registered agent: (P.O. B Sahim Zaid	ox <u>NOT</u> acceptable)	9 AHIO:			
fice Address:	540 E. McNab Road, Suite C	····	<b>10: 31</b>			
	Pompano Beach		ser*			
	(City)	(Zip code)				
aving been nam signated in this rther agree to c	ent's acceptance:  ed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes rela amiliar with and accept the obligations of many Reginered ages	it as registered agent and agree tive to the proper and complete y position as registered agent.	to act in this capacity.			

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11. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairmon: Richards A. Afonja, MD		
Address: 540 E. McNab Road, Suite C. Pompano Beach, Florida 33060		
Vice Chairman:		
Address:		-
Director:	•••	
Addross:	W. 7. AND REAL PROPERTY OF STREET, STR	
Directors		<del></del>
Address:		
B. OFFICERS	1 m	<u>_</u> ,
Richards A. Afonja, MD President:	<del>}</del> }•-	£ 9
540 E. McNab Road, Suite C, Pompano Beach. Florida 33060		65
	177	Ċ
		<b>E</b> :
Vice President:	<u> </u>	Ġ
Address:		
Secrotary:		<del></del>
Address:		
Treasurer:		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
Addresse:		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/	or directors.	
12. RAHOMSOMO.		<del></del>
/ 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 her	ein
are true and that he or she is aware that false information submitted in a document to the Department	of State constit	utes :
a third degree felony as provided for in s.817.155, F.S.  Richards A. Afonja, President		
13. (Typed or printed name and capacity of person signing application)	grade in garage distance angular	

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DOKITA247 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 FOURTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DOKITA247 INC."

WAS INCORPORATED ON THE SIXTEENTH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN FAID TO DATE.

5880258 8300 SR# 20160600245

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

Johnsy W Ballieth, Sectionary of Brate

Authentication: 201781452

Date: 02-04-16