

FILE 000 00 2257

(((H16000070109 3)))

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number
(shown below) on the top and bottom of all pages of the document.

(((H16000070109 3)))



H160000701093ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407)843-8880
Fax Number : (407)244-5690

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

Email Address: maxwell.minch@gray-robinson.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Omninox Corp.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

MAY 18 2016

J SHIVERS

(((H16000070109 3)))

(((H16000070109 3)))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Omninox Corp

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:

Maxwell Minch

Name of Person

Gray Robinson, PA

Firm/Company

720 SW 2nd Avenue

Address

Gainesville, FL 32601

City/State and Zip code

maxwell.minch@gray-robinson.com

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

For further information concerning this matter, please call:

Maxwell Minch

at (352) 372-9269

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration 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

(((H16000070109 3)))

(((H16000070109 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

1. Omninox Corp.

(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. Delaware 3. 46-4453876
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/11/2016 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 03/01/2012 (See previous registration P14000004188 & L12000030267)
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 747 SW 2ND AVE STE. 318 IMB #43 GAINESVILLE, FL 32601
(Principal office address)

747 SW 2ND AVE STE. 318 IMB #43 GAINESVILLE, FL 32601
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Gray Robinson, PA

Office Address: 120 SW 2nd Ave Suite 106

Gainesville, Florida 32601
(City) (Zip code)

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.

(((H16000070109 3)))

(((H16000070109 3)))

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Yatit ThakkerAddress: 1114 SW 104TH ST
GAINESVILLE, FL 32607

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

CEO: Yatit ThakkerAddress: 1114 SW 104TH ST
GAINESVILLE, FL 32607CFO: Ray JohnsonAddress: 718 SW 5th Avenue, Unit 413
Gainesville, FL 32601COO: Jake YapAddress: 8024 SW 65TH LANE
GAINESVILLE, FL 32608

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

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

13. Yatit Thakker, CEO

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

(((H16000070109 3)))

((H16000070109 3)))

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OMNINOX CORP." 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 EIGHTEENTH DAY OF MARCH, 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 "OMNINOX CORP." WAS INCORPORATED ON THE ELEVENTH DAY OF MARCH, A.D. 2016.

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



5984658 8300

SR# 20161739786

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202007474

Date: 03-18-16

((H16000070109 3)))