## 70000HB32

(Requestor's Name)	
(Address)	000304665360
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	10/19/1701023022 **70.
(Business Entity Name)	
(Document Number)	TALLA.
Certified Copies Certificates of Status	7.007.28 - 1
Special Instructions to Filing Officer:	28 E. F. C.
	.:'

Office Use Only

**\***\*70.00

GOT 2 20/7

To: Fla. Dept. Of State Div: Of Corp.

Ref: Sikander Corp

Please review my new paper work for the

Sikander Corporation . I sent in the paperwork one week ago. I hope this copy Is more legible. Thank you for your time and consideration.

Regards

Robert Levine

Cell 305-542-2725

Bob1313fl@gmail.com

8618 Logia Circle

Boynton Beach, Fla. 33472

2317 GCT 25 P to 0

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: SIKANDER COR	LPORATION	
	corporation - must include suffix	
Dear Sir or Madam:		
	oration for Authorization to Transact Business in Florid f Good Standing" and check are submitted to register the sact business in Florida.	
Please return all correspondence concerning	this matter to the following:	
ROBERT LEVIA		
	Name of Person	
SIKANDER CO	RPORATION	
	Firm/Company	1
8618 LOGIA C	IRCLE 3 3	
	Address	
BOYNTON BEA	CH . FL 33472	l'
	City/State and Zip code	
B0B1313FL @ G		
E-mail address: ()	to be used for future annual report notification)	<del>i</del>
For further information concerning this matt	ter, please call:	
ROBERT LEVINE at	(305)542-2725	
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 amour	n:	
S70.00 Filing Fee S78.75 Filing F Certificate of S	÷ ·	Status &

## 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. SIKANDER CORPORATION (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

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

3. 82-2109212

(FEI number, if applicable) 4. DT - 06 - 2017 5. (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 8 THE GREEN SUITE GAOI DOVER, DE 19901
(Principal office address) 8618 LOGIA CIRCLE, BOYNTON BEACH, FL 33472 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) ROBERT LEVINE Name: 8618 LOGIA CIRCLE Office Address: BOYNTON BEACH, Florida 33472
(City) (Zin 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

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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: ROBERT LEVINE
Address: 8618 LOGIA CIRCLE
BOYNTON BEACH, FL 33472
Vice President: ROBERT LEVINE
Address: 8618 LOGIA CIRCLE
BOYNTON BEACH, FL 33472
Secretary: ROBERT LEVINE
Address: 8618 LOGIA CIRCLE, BOYNTON BEACH, FL 33472
Treasurer: ROBERT LEVINE
Address: 8618 LOGIA CIRCLE, BOYNTON BEACH, FL 33472.
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12Polest Hime
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 ROBERT LEVINE PRESIDENT

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

## <u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "SIKANDER CORPORATION" 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 TENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIKANDER CORPORATION" WAS INCORPORATED ON THE SIXTH DAY OF JULY, A.D. 2017.

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

Authentication: 203372239

Date: 10-10-17