



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 10, 2018

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: UNIQUE DESIGNS, INC.
Ref. Number: W18000080515

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

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.," or "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 P18000059808.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 618A00018655

RECEIVED
DEPARTMENT OF STATE
18 SEP 11 AM 10:20

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 376986 4612432

AUTHORIZATION :

COST LIMIT :

Lynette
\$ 70.00

ORDER DATE : September 6, 2018

ORDER TIME : 10:51 AM

ORDER NO. : 376986-015

CUSTOMER NO: 4612432

FOREIGN FILINGS

NAME: UNIQUE DESIGNS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

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. Unique Designs, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Kiran Jewels, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 13-3827516
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 17, 1995 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6. upon filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 521 Fifth Avenue, Suite 820, New York, NY 10175
(Principal office address)

same as above
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

FILED
SEP -7 AM 8:39

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.

Corporation Service Company
By: Emily Croft (Registered agent's signature)
Emily Croft
Asst. Vice President

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: Prakash Dholiya

Address: 521 Fifth Avenue, Suite 820

New York, NY 10175

Director: _____

Address: _____

18
SEP - 7
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B. OFFICERS

President: Tejas Shah

Address: 521 Fifth Avenue, Suite 820

New York, NY 10175

Vice President: Amit Mehta

Address: 521 Fifth Avenue, Suite 820

New York, NY 10175

Secretary: _____

Address: _____

Treasurer: _____

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

13. Tejas Shah, President

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

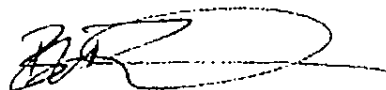
State of New York
Department of State } **ss:**

I hereby certify, that the Certificate of Incorporation of *UNIQUE DESIGNS, INC.* was filed on 04/17/1995, under the name of *C & Y CREATION, INC.*, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment *C & Y CREATION, INC.*, changing its name to *C&Y CREATIONS, INC.*, was filed 03/26/2001.

A Certificate of Amendment *C&Y CREATIONS, INC.*, changing its name to *UNIQUE DESIGNS, INC.*, was filed 09/12/2001.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 05th day of September
two thousand and eighteen.*



Brendan W. Fitzgerald
Executive Deputy Secretary of State

