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## **COVER LETTER**

TO: Registration Section Division of Corporations		
KESARIA MARKETING, INC.		
SUBJECT: Name of corporatio	n - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation to "Certificate of Existence," or "Certificate of Good Staabove referenced foreign corporation to transact busing	anding" and check are submitted to register the	
Please return all correspondence concerning this matter VISHAL MEHTA	er to the following:	
Name of	f Person	
KESARIA MARKETING, INC.		
Firm/Co	mpany	
22 JERICHO TPKE, STE 108		
Add	ress	
MINEOLA, NY 11501		
City/State	and Zip code	
TAX@NYTAXOFFICE.COM		
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please	call:	
VISHAL MEHTA 516 493-9100 at ()		
Name of Person Area Co	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 & □ \$87.50 Filing Fee. Certified Copy Certificate of Status & Certified Copy	

## 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.

KESARIA MAR I				
	orporation; must include "INCORPORATED," orp." "Inc." "Co." or "Corp.")	"COMPANY." "CORPORATION	<b>v.</b> "	
(If name unavaila	ble in Florida, enter alternate corporate name a	dopted for the purpose of transacting	ng business in Florida)	
DELAWARE 2.	3.	32-0564876		
(State or country				
(Date	of incorporation) 5.	(Date of duration, if other	(Date of duration, if other than perpetual)	
01/02/2019 5.				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15) S BLVD #1207 TAMPA, FL 33607		ity)	
/	(Principa	al office address)		
	•		- 100 <b>10</b>	
-	(Current mailin	g address, if different)		
3. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O VISHAL MEHTA	). Box <u>NOT</u> acceptable)	FILED JAN 28 HAND 90 50 ARELSEE FLORIDE ARELSEE FLORIDE	
Office Address:	2021 N. LEMANS BLVD #1207	<del>_</del>	96.56 1916 1916 1916 1916 1916 1916 1916 19	
	TAMPA	33607 , Florida	•	
	(City)	(Zip code)		
designated in this further agree to c	ent's acceptance: yed as registered agent and to accept service application, I hereby accept the appointn omply with the provisions of all statutes re familiar with and accept the obligations of	nent as registered agent and ago elative to the proper and compl	ree to act in this capacity. etc performance of my	
	(Registered a	igent'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:

	VISHAL MEHTA	
	2021 N. LEMANS BLVD #1207 TAMPA. FL 33607	
Address:		
Vice Cha	VISHAL MEHTA	
	irman:	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Director:	VISHAL MEHTA	
	2021 N. LEMANS BLVD #1207 TAMPA, FL 33607	
Director:		
Address:		
		三层 生工
B. OFF	TICERS	128
President	VISHAL MEHTA	Ma E O
Address:	2021 N. LEMANS BLVD #1207 TAMPA, FL 33607	्रिहा क्ष स्ट्रीही क
		⇒ o
Vice Pres	VISHAL MEHTA sident:	
Address:	2021 N. LEMANS BLVD #1207 TAMPA, FL 33607	<del></del>
		<del> </del>
Secretary		<u> </u>
Address:		
Treasure	VISHAL MEHTA ::	
Address:		
NOTE:	If necessary, you may attach an addendum to the application listing additional office	cers and/or directors.
12	Signature of Director or Officer	
are true a third d	cer or director signing this document (and who is listed in number 11 above) affirms and that he or she is aware that false information submitted in a document to the De egree felony as provided for in s.817.155. F.S.	
13	HAL MEHTA, PRESIDENT  (Typed or printed name and capacity of person signing application)	<u> </u>



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

DELAWARE, DO HEREBY CERTIFY "KESARIA MARKETING, 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 FOURTEENTH DAY OF JANUARY, A.D.

2019.

6822093 8300

SR# 20190251049

Authentication: 202077309

Date: 01-14-19