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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2019

LEVON HARUTYUNYAN
5636 FOX HOLLOW DR., #D
BOCA RATON, FL 33486

SUBJECT: ROYAL PARK MEDEQ, INC.
Ref. Number: W19000040586

We have received your document for ROYAL PARK MEDEQ, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate, which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 819A00008344

RECEIVED

MAY 31 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROYAL PARK MEDEQ, INC.
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:

LEVON HARUTYUNYAN

Name of Person

ROYAL PARK MEDEQ INC

Firm/Company

5636 FOX HOLLOW DR. #D

Address

BOCA RATON FL 33486

City/State and Zip code

ROYALPARKMEDEQ@aol.com

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

For further information concerning this matter, please call:

LEVON HARUTYUNYAN

Name of Person

at (312) 709-2325

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:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, 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.

1. ROYAL PARK MEDEQ INC
(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. CALIFORNIA 3. 42-5507673
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07.10.2015 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 05.01.2019
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5636 FOX HOLLOW DR #D BOCA RATON, FL. 33486
(Principal office address)

(Current mailing address, if different)

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

Name: LARISA SCHULTZ

Office Address: 5636 FOX HOLLOW DR #D

BOCA RATON, FL. Florida 33486
(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.

Larisa Schultz
(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 LEVON HARUTYUNYAN

Address: 5636 FOX HOLLOW DR #D BOCA RATON FL 33486

Vice Chairman

Address:

Director: LEVON HARUTYUNYAN

Address: 5636 FOX HOLLOW DR #D BOCA RATON FL 33486

Director:

Address:

B. OFFICERS

President:

Address:

Vice President:

Address:

Secretary:

Address:

Treasurer: LARISA SCHULTZ

Address: 5636 FOX HOLLOW DR #D BOCA RATON FL 33486

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

12. LEVON HARUTYUNYAN

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. LEVON HARUTYUNYAN, DIRECTOR CHAIRMAN

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

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ROYAL PARK MEDEQ, INC

FILE NUMBER: C3804794
FORMATION DATE: 07/10/2015
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of May 17, 2019.

ALEX PADILLA
Secretary of State