

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

NAME  
\* CONSENT  
ATTACHED

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

2ND ATTEMPT

PLEASE KEEP ORIGINAL  
FILE DATE: 10/7/2019

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

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION  
REVOLVE TECHNOLOGY COMPANY, INC.**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

2019 OCT 14 09:57

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**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.

REVOLVE TECHNOLOGY COMPANY, INC.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. \_\_\_\_\_ 3. \_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  
DELAWARE (FEI number, if applicable)
4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
- 55 SE 2nd Ave., Delray Beach, FL 33444
7. \_\_\_\_\_  
(Principal office address)
- \_\_\_\_\_   
(Current mailing address, if different)

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

Corporate Creations Network Inc.

Name:

11380 Prosperity Farms Road #221E

Office Address:

Palm Beach Gardens

33410

(City)

, Florida

(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.*

Joseph Panholzer, Special Secretary

(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: Asoka Veeravagu ✓  
55 SE 2nd Ave., Delray Beach, FL 33444  
Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: Scott Blando ✓  
55 SE 2nd Ave., Delray Beach, FL 33444  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

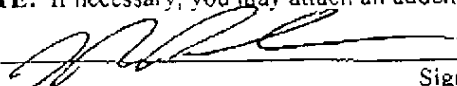
President: Asoka Veeravagu ✓  
55 SE 2nd Ave., Delray Beach, FL 33444  
Address: \_\_\_\_\_

Vice President: Scott Blando ✓  
55 SE 2nd Ave., Delray Beach, FL 33444  
Address: \_\_\_\_\_

Secretary: Asoka Veeravagu ✓  
55 SE 2nd Ave., Delray Beach, FL 33444  
Address: \_\_\_\_\_

Treasurer: Scott Blando ✓  
55 SE 2nd Ave., Delray Beach, FL 33444  
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.

Joseph Panholzer, Attorney-in-Fact for Asoka Veeravagu, President

13. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REVOLVE TECHNOLOGY COMPANY, 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 SEVENTH DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REVOLVE TECHNOLOGY COMPANY, INC." WAS INCORPORATED ON THE NINTH DAY OF OCTOBER, A.D. 2017.

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



6573617 8300

SR# 20197422157

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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

Jeffrey W. Bullock, Secretary of State

Authentication: 203742594

Date: 10-07-19

REVOLVE TECHNOLOGIES LLC  
55 SE 2ND AVENUE,  
STE. 406  
DELRAY BEACH, FL 33444

October 10, 2019

Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Subject: Consent to Use Similar Name**

We the undersigned, hereby authorize the use of the name Revolve Technology Company, Inc. as the name of a filing entity for the purpose of submitting a filing instrument to the Department of State. The undersigned certifies to being authorized by the holder of the existing name to give this consent.

Thank you.

Sincerely,



Asoka Veeravagu, PRESIDENT, SECRETARY, AUTHORIZED MEMBER  
REVOLVE TECHNOLOGIES LLC

FILED  
2019 OCT 14 PM 1:00  
TALLAHASSEE, FL