## F1900005273

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
To show the
in Mr.
10900019302

Office Use Only



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08/22/19--01011--011 \*\*98.25

NOV 26 2019 M. SOLOMON



October 25, 2019

DAVID PHILLIP COHANA INC. 17485 SW 31ST CT MIRAMAR, FL 33029

SUBJECT: COHANA INC. Ref. Number: W19000094705

We have received your document for COHANA INC. and check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Your corporate name is unavailable. Chapter 607.0401(4), Florida Statutes states corporate names "must be distinguishable from the names of all other entities or filings organized or registered under the laws of this state, which names are on file with the Division."

You will not be able to do a Foreign Name Registration. If you need to file Foreign Qualification papers and use an alternate name, please go tohttp://www.sunbiz.org under "forms & fees" and select the current type of registration that you have in your state. You will need to look for Foreign Qualification forms, if you need to file.

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

Letter Number: 419A00022079

Mel Solomon Regulatory Specialist II Supervisor



August 27, 2019

DAVID PHILLIP 17485 SW 31ST CT MIRAMAR, FL 33029

SUBJECT: COHANA INC. Ref. Number: W19000079302

We have received your document for COHANA INC. and your check(s) totaling \$96.25. 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.

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.

Tacarri K Glass Regulatory Specialist II

www.sunbiz.org

Letter Number: 519A00017756

#### **COVER LETTER**

TO:	Registration Se Division of Cor				
SUBJI	ECT:	Cohana	nC.		
ū		Name of corporat	ion - must include suffix		
Dear Si	ir or Madam:				
"Certif	icate of Existenc	ion by Foreign Corporation e," or "Certificate of Good Son corporation to transact bus	Standing" and check are sub		
Please	return all corresp	ondence concerning this ma	tter to the following:		
		David Phi	11:P		
		Name	of Person		
		Cohana	lac		
		Firm/C	Company		
		17485 SW	3/st (I		
		Ac	ldress		
		Tiramar FL 33	029		
	•	City/Stat	e and Zip code		
		DPhil-122010	Gnail Com	<del></del>	
		E-mail address: (to be use	ed for future annual report r	notification)	
For fur	ther information	concerning this matter, pleas	se call:		
Do	wid Phillip	at (	1 204-45"	14	
	Name of Person Area Code Daytime Telephone Number				
	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	
Enclose	ed is a check for	the following amount:			
		-	<b>5</b> 670.75 EU: P. A	007 60 577	
⊔ \$/0.	.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	
				raid	

# MIN HOV 12 AM 9:

## 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. Cinhana Inc.		
(Enter name of corporation: must include "INCORPOR" Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")	RATED," "COMPANY," "CORPORATION,"	
	re Inc.	<del></del>
• l	ate name adopted for the purpose of transacting business in Florida	1)
2. Delawase,	3. <u>84 - 2695466</u>	
(State or country under the law of which it is incorpor	rated) (FEI number, if applicable)	
A August 716 2 NI9	5	
(Date of incorporation)	5. (Date of duration, if other than perpetual)	<del></del>
6.		
	ousiness in Florida, if prior to registration)	
	& 607.1502, F.S., to determine penalty liability)	
7. 1985 SW 3/st CT,	Miramar FL, 33029	
<b>V</b> .	(Principal office address)	. 5
		. 2
(Curre	ent mailing address, if different)	<del>-</del> - <del>-</del>
		77.1.1 m
8. Name and street address of Florida registered age	ent: (P.O. Box NOT acceptable)	ag r
5 1 DI 11 P	, , ,	(설립 <b>2</b> 199
Name: <u>David Thillil</u>	<del></del>	-00 -3.55
Office Address: 17485 SW 3 St CT		E C
Miranas Fl	33019 22019	
Misamas Fl.,	<u>33029</u> , Florida <u>33029</u> (Zip code)	
(City)	(Eip 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.

(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: <u>Pauld Thill</u>	
Address: 9217 NW 49th Ph Sunrise Fh, 33351	
Vice Chairman:	<del></del>
Address:	
Director:	
Address:	
Director:	
Address:	* ; * co
Address:	
n officens	7 12 W
B. OFFICERS	3- N 2- <b>≥</b>
President: David Thillit	
Address: 9217 NW 49th Ph Suncise FL, 33361	- 22. N
Vice President:	
Address:	
	<u></u>
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additi	ional officers and/or directors.
12.	
Signature of Director or Officer	an) officers that the feate stand have
The officer or director signing this document (and who is listed in number 11 above are true and that he or she is aware that false information submitted in a document	
a third degree felony as provided for in s.817.155. F.S.	
13. DOUID NILL TESTOLETT	nlication)



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

DELAWARE, DO HEREBY CERTIFY "COHANA 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 EIGHTEENTH DAY OF SEPTEMBER, A.D. 2019.

Authentication: 203617851

Date: 09-18-19



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned David	Phillip (Name)	do hereby certify
that this Resolution of the Board of D	irectors of	
Cohana	Inc.	
a corporation duly organized and exis		State or Country)
was adopted onAugust	7th 2019	, adopting the alternate
name of Cohon (Alte	a. Case InC.	a corporate suffix)
for use in Florida as its real name is u	navailable in Florida.	
Date: 11 6 2019		President
Signature of Chairman, Vice Chairma director or any office	in of the Board, a er	Title of person signing

#### FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314