(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
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COVER LETTER

TO:	Registration S Division of C				
SHR.	JECT:	Nika Comr	munications I	ncorporated	
17 (7 13).		Name of	corporation -	- must include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Exister		f Good Stand	Authorization to Transact B ling" and check are submit s in Florida.	
Please	return all corre	spondence concerning	g this matter	to the following:	ZOIS DEC 13
Andr	ew S. Glazier				5 DE
			Name of F	Person	表 - F
Glazie	er & Glazier, P.A	٨.			SSE
			Firm/Comp	pany	(
8825	Perimeter Park	Blvd., Suite 504			L03
			Addre	SS	Dr. o
Jacks	onville, Florida	32216			
	***		City/State an	d Zip code	
kayda	novart@gmail.d				
		E-mail address: ((to be used fo	or future annual report noti	fication)
For fu	rther informatic	on concerning this mat	iter, please ca	ill:	
Α	ndrew S. Glazie	er a	904 I (997-1033	
	Name of Per	`	Area Code	Daytime Telephon	e Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADD Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL. 3	ion orations
Please		or the following amou able to: FLORIDA DEF S78.75 Filing Certificate of	PARTMENT Fee &		☐ \$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.

Nika Communi 1.	cations Incorporated		
(Enter name of c	orporation; must include "INCORPORATED," forp," "Inc," "Co." or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail:	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida)	
Delaware	_		
(State or country under the law of which it is incorpor July 1, 2019		(FEI number, if applicable)	
(Date of incorporation) 6.		(Date of duration, if other than perpetual)	
7	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 Connector, Suite 200, Atlanta, Georgia 30342 (Principa	Florida, if prior to registration) 12, F.S., to determine penalty liability)	
	(Current mailing	address, if different)	
8. Name and stree Name:	et address of Florida registered agent: (P.O Glazier & Glazier, P.A.	Box NOT acceptable)	
Office Address:	8825 Perimeter Park Blvd. Suite 504		
	Jacksonville	 32216 , Florida	
	(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.

(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.

1. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS Chairman: Address: _____ Vice Chairman: Address: Vladimir Kaydanov Director: 28 Riddle Drive, Unit A Address: _ Palm Coast, Florida 32164 Address: _ **B. OFFICERS** Vladimir Kaydanov President: 28 Riddle Drive, Unit A Address: Palm Coast, Florida 32164 Vice President: Address: ____ Vladimir Kaydanov ecretary: 28 Riddle Drive, Unit A ddress: ___ Palm Coast, Florida 32164 reasurer: DTE: If necessary, you may attack an addengam to the application listing additional officers and/or directors. Signature of Director or Officer e officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein true and that he or she is aware that false information submitted in a document to the Department of State constitutes ird degree felony as provided for in s.817.155, F.S. Vladimir Kaydanov, President

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

11. Names and business addresses of officers and/or directors:

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "NIKA COMMUNICATIONS INCORPORATED" 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 NINTH DAY OF DECEMBER, A.D.

2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NIKA

COMMUNICATIONS INCORPORATED" WAS INCORPORATED ON THE FIRST DAY OF

JULY, A.D. 2019.

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

Authentication: 204161501

Date: 12-09-19

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