Facco 1854

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of Status	S
Special Instructions to	Filing Officer:	
		ĺ

Office Use Only



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04/13/20--01009--002 **70.00

TILED
2020 APR 13 PH 4: 14
SECAL FARY OF STATE
ALLAHASSEE, FLORIDA





April 3, 2020

FL Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314-6327

Re:

Believe Health Inc.

Application by Foreign Corporation for Authorization to Transact Business in Florida

Florida

To Whom It May Concern:

Enclosed please find an Application by Foreign Corporation for Authorization to Transact Business in Florida for our client, Believe Health Inc. Once the application has been processed, please forward evidence of approval to the mailing address on the application. If there is any issue, or if you require any further information, please do not hesitate to contact us.

Thank you,

LicenseLogix 140 Grand Street, Suite 300 White Plains, NY 10601 service@licenselogix.com (800) 292-0909

COVER LETTER

TO:		ration Se on of Co	ection rporations				
SUBJ	ECT:	Believo Ho	ealth Inc.				
			Name	of corporat	tion - m	oust include suffix	
Dear S	ir or Ma	ndam:					
"Certif	icate of	Existenc		te of Good S	Standin	g" and check are sub	ont Business in Florida." omitted to register the
Please	return a	.ll corres _l	oondence concer	ning this ma	itter to	the following:	RI3
				ijay Kedar, Chiel	Executive	Officer	E P
				Name	of Pers	son	PH F. IF
				Believe Hea	atth Inc.		三
				Firm/C	Compan	у	P
			1	123 Broadway #1	1107		
				Α	ddress		
				New York, N	1Y 10010		
				City/Stat	te and 2	Zip code	
				regulatory@tom	norrowheal	lth.com	
			E-mail addre			uture annual report	notification)
For fur	ther inf	ormation	concerning this	matter, plea	se call:		
Vijay Ke	dar			at (<u>724</u>)	719-8876	
	Name	of Perso	on	Area (Code	Daytime Telep	phone Number
	Regist Divisi Cliftor 2661 I	ration Se on of Co n Buildin	rporations g : Center Circle	SS:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
Enclos	ed is a c	check for	the following ar	nount:			
□ \$70).00 Fili	ng Fee	S78.75 Fili Certificate			78.75 Filing Fee & ertified Copy	☐ \$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.

Believe Health Inc.					
	orporation; must include "INCORPORATE orp." "Inc," "Co," or "Corp.")	D," "CON	IPANY," "CORPO	RATION."	
me co., c	orp. me. co. or corp. y				
					
(If name unavail	able in Florida, enter alternate corporate nan	ne adopted	for the purpose of t	ransacting business in F	'lorida)
2. Delaware		383-1	175120	7. 28	
(State or countr	y under the law of which it is incorporated)		(FEL numl	ner, if applicable)	77
4. 07/09/2018		5. Perpe	etual	20 %	_
	of incorporation)	-'·		if other than perpetual) FTT
				EF. OF	
6	(Date first transacted busines	s in Florida	a. if prior to registrat	tion)	F
	(SEE SECTIONS 607.1501 & 607				F
7	1123 Broadway #1107,	Naw York NY	10010	P	
/·		cipal office			
		·			
	Same as Abov	·	ess, if different)		
	(Curen ma	inng addre	.ss, ii differenti		
8. Name and stree	et add <u>ress</u> of Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	Corporate Creations Network Inc.				
Office Address:	11380 Prosperity Farms Road #221E				
	Palm Beach Gardens		Florida 33410		
	(City)	··	(Zip code	<u> </u>	
			·		
	ent's acceptance:	. ,.			
	ted as registered agent and to accept se application, I hereby accept the appoi				
	omply with the provisions of all statute		• • • • • • • • • • • • • • • • • • • •		• •
	familiar with and accept the obligation				, ,
	Visas	Kedar	00/44	, 2020	
	0.0		03 / 11 /	2020	
_	(Register	ed 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. Nam	and business addresses of officers and/or directors:
A. DIRI	CTORS
Chairman	
Address:	
-	
Vice Chai	nan:
_	
Director:	TALLAH APR
	APR !
	SSE SE
Director	Fig. 1
	ORIGINAL PROPERTY OF THE PROPE
raucos.	P
B. OFFI	CERS
President:	Vişay Kedar (CEO)
Address:	207 Chardonnay Circle Grbsonia PA 15044
Vice Presi	ent:
Address:	
ridaress.	
Coording	
NOTE:	necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	Vijay Kedar 03/11/2020 Signature of Director or Officer
The offic are true a	signature of Director or Officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein d that he or she is aware that false information submitted in a document to the Department of State constitutes ree felony as provided for in s.817.155, F.S.
13	Vijay Kedar CEO
	(Typed or printed name and capacity of person signing application)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "BELIEVE HEALTH INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE NINTH DAY OF

2018, AT 10:15 O'CLOCK A.M.

CERTIFICATE OF AMENDMENT, FILED THE TWELFTH DAY OF MARCH,

2019 AT 4:58 O'CLOCK P.M.

RESTATED CERTIFICATE, FILED THE TWENTY-FOURTH DAY OF MAY

2019, AF 9:04 O CLOCK A.M.

GERROHER MES MES ONES GERROHERWES ON RECORD OF THE ME

AFORESATO CORPORATION, "BELIEVE HEALTH INC.".

AND INDO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE

EIIN BURED TO DAVE

6967149 3310 SR# 202019777778

Arthentletton: 202542951

Date: 03:09:20