## F20000003885

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2020 ACC 17 FM 5: 49

7/9/

## **COVER LETTER**

	istration Section ision of Corporations			
SUBJECT	Nation Cosh Inc			
SUBJECT	Name of	corporation - r	nust include suffix	
Dear Sir or	Madam:			
"Certificate	d "Application by Foreign Corp of Existence," or "Certificate of enced foreign corporation to tran	Good Standir	thorization to Transact Business in Florida," g" and check are submitted to register the n Florida.	
Please retur	n all correspondence concerning	this matter to	the following:	
Uri Ratner				
		Name of Pe	son	
		Firm/Compa	ny	
8631 Keeler	Ave			
	<del>-</del>	Address		
Skokie, IL 6				<u> </u>
		City/State and	Zip code	2020 NIG 17
ruthgoranep	a@gmail.com	-10	Control of Control	
	E-mail address: (	(to be used for	future annual report notification)	
For further	information concerning this mat	tter, please cal	:	PH
Ruth Goran	9	847	287-7832	نان
No	une of Person	Area Code	Daytime Telephone Number	<u></u>
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is Please make \$\fomale \text{\$70.00}	s a check for the following amoust check payable to: FLORIDA DEI Filing Fee S78.75 Filing Certificate of	PARTMENT C . Fee & $\Box$	DF STATE \$78.75 Filing Fee & S87.50 Filing Fe Certified Copy Certificate of St 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.

(If name unavailab		e adopted for the purpose of transacting business in Florida) 82-4614174			
	under the law of which it is incorporated)	3. (FEI number, if applicable)			
03/15/2011		5. Perpetual  (Date of duration, if other than perpetual)			
(Date o	f incorporation)				
n/a					
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.	s in Florida, if prior to registration) 1502, F.S., to determine penalty liability)			
1445 16th St Apt 1	102, Miami Beach, FL 33139-2288				
<del></del>	(Principal o	ffice street address)			
8631 Keeler Av	ve Skokie, IL 60076				
<u> </u>	(Current mai	ling address, if different)			
Name and street	address of Florida registered agent: (P	'.O. Box NOT acceptable)			
Name:	Uri Ratner				
ffice Address:	1445 16th St Apt. 1102				
Office Address:	Miami Beach	, Florida 33139-2288 (Zip code)			
	(City)	(Zip code)			
B 14 1 .					
avino been name	nt's acceptance: ed as registered agent and to accept set	rvice of process for the above stated corporation at the			
aving been name	ed as registered agent and to accept set application. I hereby accept the appoin	rvice of process for the above stated corporation at the ntment as registered agent and agree to act in this cape is relative to the proper and complete performance of n			

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

A. DIRECTORS					
□Chairmaл	Name: Uri Ratner	□Chairman	Name:		<del></del>
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	Miami Beach, FL 33139-2288	Director		<del></del>	
President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary		Treasurer	
Other	□Other	□Other		Other	
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director		□Director			
□President		□President			<del></del>
□Vice President		□ Vice President			
□Secretary	□Treasurer	Secretary		Treasurer	
Other	Other	□Other	<del></del>	Other	
□Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		Director		<del></del>	7020
□President		□President			20
□Vice President		□Vice President			
Secretary	□Treasurer	□Secretary		□Treasurer	7 P
□Other	Other	Other	<del></del>	Other	
Important Notice individuals may l	Use an attechment to report more than six (6). The are	ttachment will be imag ment of State Annual F	ted for reporting Report form.		
12.	Signature of Directo	r or Officer			
The officer or dir she is aware that s.817.155, F.S.	ector signing this document (and who is listed in num false information submitted in a document to the Dep	ber 11 above) affirms	that the facts statutes a third deg	ted herein are true a ree felony as provid	nd that he or led for in
13	Uri Ratner  (Typed or printed name and capacity of pe	rson signing application	on)		
	4 s Meet of harmen many achieval, as he	<i>□ □</i> 11 ···			



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

NELSON CASH, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 15, 2011, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

64 St 13



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 11TH day of AUGUST A.D. 2020 .

Authentication #: 2022403118 verifiable until 08/11/2021

Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE