# F2000000 0 4694

| (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: |  |  |  |  |  |
| 00611 00547                             |  |  |  |  |  |
| W20000108480<br>W20000108480            |  |  |  |  |  |
| 00647                                   |  |  |  |  |  |

Office Use Only



500351202165

0.702/36 - 61000 - 638 - 65/8.75

18.4 16 E. 4:53

RECEIVED



## COVER LETTER

| <b>TO:</b> Registration Section Division of Corporation  | s                        |  |   |  |
|--|--------------------------|--|---|--|
| SUBJECT: Cathect Communic  | eations Inc.             |  |   |  |
| SUBJECT.   | Name of corporation      | n - must include suffix  |   |  |
| Dear Sir or Madam:   |                          |  |   |  |
| The enclosed "Application by F<br>"Certificate of Existence," or "C<br>above referenced foreign corpor   | Certificate of Good Sta  | r Authorization to Transact Busin<br>anding" and check are submitted<br>less in Florida.               | ness in Florida."<br>to register the          |  |
| Please return all correspondence   | concerning this matte    | er to the following:   |   |  |
| Suzane Anderson  |                          |  |   |  |
|  | Name o                   | f Person   |   |  |
| Cathect Communications Inc.  |                          |  |   |  |
|  | Firm/Co                  | mpany  |   |  |
| 2160 Lexington Lane  |                          |  |   |  |
|  | Add                      | ress   |   |  |
| Cummings GA 30040  |                          |  |   |  |
|  | City/State               | and Zip code   |   |  |
| info@cathecte.com  |                          |  |   |  |
| E-ma   | iil address: (to be used | for future annual report notifical   |   |  |
| For further information concerning this matter, please call:   |                          |  |   |  |
| Suzane Anderson  | at (                     | 6786660075   | 7290 - 1                                      |  |
| Name of Person   | Area Co                  |  | umber   |  |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |                          | MAILING ADDRE<br>Registration Section<br>Division of Corporati<br>P.O. Box 6327<br>Tallahassee, FL 323 | ons   |  |
| <del>-</del>   | ORIDA DEPARTMEN          | ☐ \$78.75 Filing Fee & ☐ \$<br>Certified Copy G  | 87.50 Filing Fee.<br>Certificate of Status of |  |

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACA 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.

|  | ilable in Florida, enter alternate corporate name ac                | dopted for the purpose of transacting busine                                       | ss in Florida) |
|--|---|--|----------------|
| corgia   | 3. Erry under the law of which it is incorporated)                  | 35-0572544   |                |
| tate or coun                                     | ry under the law of which it is incorporated)                       | (FEI number, if applicable   | )              |
| 3/2020   | e of incorporation) 5.  |  |                |
|  |   |  | petual)        |
|  | (Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 | Fig. 11 (C. 1) and address to a  |                |
|  | (SEE SECTIONS 607.1501 & 607.150                                    | Florida, if prior to registration) 12, F.S., to determine penalty liability)       |                |
| Lexington  | Lane Cummings GA 30040  | •  |                |
| are et   |   | e <u>street</u> address)   |                |
| <del>/                                    </del> |   | ; address, if different)   |                |
| ne and <u>stre</u><br>Name:                      | et address of Florida registered agent: (P.O. Incorp Services Inc.  | Box NOT acceptable)  |                |
| Address:   | 17888 67th Court North  |  | Ţ,             |
| . 10 0. 000                                      | Loxahatchee   | Florida 33470  | -              |
|  | (City)  | Florida 33470 (Zip code)   | -              |
|  | ent's acceptance:<br>led as registered agent and to accept servic   | re of process for the above stated corp<br>went as registered agent and agree to a |                |

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

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

| A. DIRECTORS       |   |                            |          |  |
|--------------------|---|----------------------------|----------|--|
| □Chairman          | Name: Ishrat Jahan  | □Chairman                  | Name:    |  |
| □Vice Chairman     | 2160 Lexington Lane Cummings GA 30040 Address:  | □Vice Chairman             | Address: |  |
| Director           |   | □Director                  |          |  |
| ⊡President         |   | □President                 |          |  |
| □Vice President    |   | □Vice President            | ~        | <del></del>                                |
| □Secretary         | □Treasurer  | Secretary                  |          | □Treasurer                                 |
| Other              | Other   | □Other                     |          | Other                                      |
| □ Chairman         | Name:   | □ Chairman                 | Name:    |  |
| □Vice Chairman     | Address:  | □Vice Chairman             | Address: |  |
| □Director          |   | Director                   |          |  |
| □President         |   | □President                 |          |  |
| □Vice President    |   | □Vice President            |          |  |
| □Secretary         | □Treasurer  | ☐ Secretary                |          | □Treasurer                                 |
| □Other             | □ Other   | □Other                     |          | Other                                      |
| □ Chairman         | Name:   | □Chairman                  | Name:    | 3  |
| □Vice Chairman     | Address:  | □Vice Chairman             |          | •  |
| □Director          |   | □Director                  |          | <u></u>                                    |
| □President         |   | □President                 |          | , :<br>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| □Vice President    |   | □Vice President            |          | )<br>5                                     |
| □Secretary         | □Treasurer  | ☐ Secretary                |          | □Treasurer                                 |
| □Other             | Other   | Other                      |          | □Other                                     |
| individuals may be | Use an attachment to report more than six (6). The added to the index when filing your Florida Departure of Shrut Tah.      | tment of State Annual Re   |          | purposes only. Non-indexed                 |
| 12.                | Signature of Direct   |                            |          | <del></del>                                |
|                    | ctor signing this document (and who is listed in nurulse information submitted in a document to the Department of the Taban | partment of State constitu |          |  |
| 13.                | +211100 OUNDA   | 1                          |          |  |

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

Control Number: 20050980

### STATE OF GEORGIA

#### Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

l, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### Cathect Communications Inc.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 19555899
Date Inc/Auth/Filed: 04/03/2020
Jurisdiction : Georgia
Print Date : 08/25/2020

Form Number : 211

---

; ::--

Brad Raffensperger

Brad Raffensperger Secretary of State

