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| (Requestor's Name) | | | | | |
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| (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: | | | | | |
| emailed consent Itr | | | | | |
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COVER LETTER

| | egistration Section Division of Corporations | | | | |
|--|--|--|--|--|--|
| SUBJEC | FANTASTIC ATHLETES C | ORPORATION | | | |
| SUBJEA | | of corporation - r | nust include suffix | | |
| Dear Sir o | or Madam: | | | | |
| "Certifica | osed "Application by Foreign Co ate of Existence," or "Certificate berenced foreign corporation to t | of Good Standin | g" and check are submi- | | |
| Please ret | urn all correspondence concern | ing this matter to | the following: | | |
| Todd Schl | nat, Esq. | | | | |
| - | | Name of Per | son | | |
| Hoffman d | & Associates, Attorneys-at-Law, L | LC | | | |
| | | Firm/Compar | ıy | | |
| 6100 Lake | Forrest Drive, Suite 300 | | | | |
| | | Address | • | | |
| Atlanta, G | eorgia 30328 | | | | |
| | | City/State and | Zip code | ~·· | |
| todd@hofi | fmanestatelaw.com | | | | |
| | E-mail address | s: (to be used for | future annual report noti | ification) | |
| For furthe | er information concerning this n | natter, please call: | | 53 53 | |
| Todd Schl | nat | at () | 255-7400 | 77 | |
| 1 | Name of Person | Area Code | Daytime Telephor | ne Number | |
| 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 | | |
| Please mal | is a check for the following amove check payable to: FLORIDA D Filing Fee | EPARTMENT OF Significant Signi | | ⇒ \$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.

| If name unavail | able in Florida, enter alternate corporate name ac | opted for the purpose of transacting bus | siness in Florida) |
|--|--|--|--------------------|
| DELAWARE | | 5-3101006 | |
| (State or country under the law of which it is incorporated) | | (FEI number, if applicable) | |
| September 16, 2 | 5. <u>_</u> | (Date of duration, if other than p | |
| (Date | of incorporation) | (Date of duration, if other than p | perpetual) |
| | | | |
| | (Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 | Florida, if prior to registration) 2. F.S., to determine penalty liability) | |
| 350 Phillips Roa | id, Apt# 7108, Tallahassee, Florida, 32308 | γειωί, ιωσιί, , | |
| · | (Principal office | street address) | |
| | , | <u> </u> | |
| | (Current mailing | address, if different) | |
| | (************************************** | The state of the s | |
| | | | |
| Name and stree | et address of Florida registered agent: (P.O. | Box NOT acceptable) | |
| | et address of Florida registered agent: (P.O. Efrat Aynor | Box <u>NOT</u> acceptable) | £ |
| Name and <u>stre</u> e Name: | Efrat Avnor | Box <u>NOT</u> acceptable) — | 2.50 E |
| | • | Box <u>NOT</u> acceptab l e) | 2.208 - 5 |
| Name: | Efrat Avnor | 32308 | 2758 - 25 F |
| Name: | Efrat Avnor 2350 Phillips Road, Apt# 7108 | | |
| Name: fice Address: | Efrat Avnor 2350 Phillips Road, Apt# 7108 Tallahassee | Florida | |

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.

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

| A. DIRECTORS | • | | | | | | |
|--|--|------------------|--|--|--|--|--|
| □¢hairman | Name: EFRAT AVNOR | □Chairman | Name: SAMI SABRI | | | | |
| □Vice Chairman | Address: 2350 Phillips Road, Apt# 7108 | □Vice Chairman | Address: 2350 Phillips Road, Apt# 7108 | | | | |
| Director | Tallahassee, Florida, 32308 | Director | Tallahassee, Florida, 32308 | | | | |
| ■ President | | □President | | | | | |
| □Vice President | | ■ Vice President | | | | | |
| ☐ Secretary | □Treasurer | ■ Secretary | □Treasurer | | | | |
| □Qther | □Other | □Other | □Other | | | | |
| İ | | | | | | | |
| □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 | Nume: | | | | |
| □ Vice Chairman | Address: | □Vice Chairman | Address: | | | | |
| □Director | | □Director | | | | | |
| □President | | □President | (S) | | | | |
| □ Vice President | | □Vice President | | | | | |
| Secretary | □Treasurer | ☐ Secretary | □Treasurer [·] | | | | |
| □Other | □Other | Other | | | | | |
| Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. Signature of Director or Officer | | | | | | | |

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Efrat Avnor, President



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

DELAWARE, DO HEREBY CERTIFY "FANTASTIC ATHLETES CORPORATION" 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 TWENTY-NINTH DAY OF OCTOBER,

A.D. 2020.



Authentication: 203969446

Date: 10-29-20

Franklin, Sharon D.

From:

Alon Levy < Alon@ltaxg.com>

Sent:

Wednesday, November 25, 2020 6:45 PM

To:

Franklin, Sharon D.

Subject:

Fantastic Athletes Corporation-W20000131401

Attachments:

Rejection letter.pdf; Cancelation approval.pdf

EMAIL RECEIVED FROM EXTERNAL SOURCE

The attachments/links in this message have been scanned by Proofpoint.

Dear Ms. Franklin

As a respond to your rejection letter dated 11/16/2020

and according to the instruction I received from FL department of state,

we dissolved our entity that cause the rejection FANTASTIC ATHLETES LLC (Document Number L20000151050)

We are the same owners and we are giving the permission to Fantastic Athletes Corporation to use the name and we are not going to reinstate the LLC in the future.

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Please process the Fantastic Athletes Corporation as a foreign corporation entity in FL.

Attached:

- The rejection letter including the original filing request
- Cancelation of FANTASTIC ATHLETES LLC receipt

Let me know if anything else required

Sincerely,

Nor Levy, EA

Tall And Business Consultant

- a. ألا يه Group, Inc.
- 404 e92 1425
- 34 [404] -91 5744
- e. (24) 429-1473
- restriction e Number 03,72, 3535 (Ext. 1
- r 🛊 <u>ALCN@L</u>TAXG.COM

WWW.LTAXG.COM

Entire to Judicial investigation of the CERT AND CONFIDENTIAL INFORMATION protected by federal The law in the other described the use of the individuals or entities designated as recipients. The information to the fine thirty in the cities of strued at tax advice, if you are not an intended recipient of the elimain volu 🗼 👉 🖂 the strong of Constellibration and the properties of the contents of this exment. followed by the control of the control other than the intended recipient does not constitute a waiver of any applicable