

F21000004947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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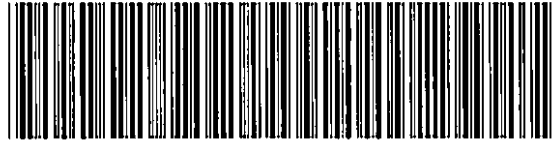
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DATE: 8/26/21

NAME: RADIATION, INC.

TYPE OF FILING: APPLICATION

COST: 78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Attach

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RADIATION, INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DEVORA NEALY

Name of Person

SMITH, GAMGRELL & RUSSELL, LLP

Firm/Company

1230 PEACHTREE STREET NE, SUITE 3100

Address

ATLANTA, GA 30309

City/State and Zip code

DNEALY@SGRLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEVORA NEALY at (404) 815-3500
Name of Person Area Code Daytime Telephone 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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified 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.*

RADIATION, INC.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JULY 28, 2021 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. Design Center of the Americas, 1855 Griffin Road, #A309, Dania Beach, FL 33004
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: SMITH, GAMBRELL & RUSSELL, LLP

Office Address: 50 N. LAURA STREET, SUITE 2600
JACKSONVILLE, Florida 32202
(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.

SMITH, GAMBRELL & RUSSELL, LLP By YASH B. DAVE

DocuSigned by:
Yash Dave
F00071A52C854D7...
(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.

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

2021 APR 26 AM 9:15

A. DIRECTORS

☐ Chairman Name: JONATHAN YIFAT

☐ Vice Chairman Address: Design Center of the Americas

☒ Director 1855 Griffin Road #A309

☒ President Dania Beach, FL 33004

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: DR. ARIELLA GOLOMB

☐ Vice Chairman Address: Design Center of the Americas

☒ Director 1855 Griffin Road #A309

☐ President Dania Beach, FL 33004

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: NITZAN SHALIT

☐ Vice Chairman Address: Design Center of the Americas

☐ Director 1855 Griffin Road #A309

☐ President Dania Beach, FL 33004

☐ Vice President _____

☒ Secretary ☐ Treasurer

☒ Other VP OF FINANCE ☐ Other _____

☐ Chairman Name: JIANPING ZHU

☐ Vice Chairman Address: Design Center of the Americas

☒ Director 1855 Griffin Road #A309

☐ President Dania Beach, FL 33004

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: STEVEN LOTZ

☐ Vice Chairman Address: Design Center of the Americas

☐ Director 1855 Griffin Road #A309

☐ President Dania Beach, FL 33004

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other VP OF SALES ☐ Other _____

☐ Chairman Name: DR. TOBY COSGROVE

☐ Vice Chairman Address: Design Center of the Americas

☒ Director 1855 Griffin Road #A309

☐ President Dania Beach, FL 33004

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ 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. Steven Lotz
Signature of ~~Director~~ 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. STEVEN LOTZ, VP OF SALES
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RADIATION, INC." 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-FIFTH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RADIATION, INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF JULY, A.D. 2021.

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



6122827 8300

SR# 20213078393

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204006230

Date: 08-25-21