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RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

XX PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 999864 7267768 AUTHORIZATION : COST LIMIT : \$\70.00 ORDER DATE: September 15, 2021 ORDER TIME : 2:14 PM ORDER NO. : 999864-005 CUSTOMER NO: 7267768 FOREIGN FILINGS NAME: RISE HEALTHCARE TECH, INC. XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations			
SURI	Rise Healthcare Tech, Ind	c.		
0000		me of corporation	on - must include suffix	
Dear S	Sir or Madam:			
"Certif	nclosed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation	cate of Good Sta	anding" and check are s	sact Business in Florida," ubmitted to register the
Please	return all correspondence conc	erning this matte	er to the following:	
Ahmed	i Elsayyad			
		Name of	f Person	
Rise H	ealthcare Tech, Inc.			
		Firm/Cor	npany	
851 NE	Elst Ave, Unit 908			
		Addı	ress	
Miami.	. FI 33132			
		City/State a	and Zip code	· · · · · · · · · · · · · · · · · · ·
ahmed(@rxdefine.com			
	E-mail addi	ress: (to be used	for future annual repor	t notification)
For fur	ther information concerning thi	s matter, please	call;	
Joseph	Mignone	646 at (414-6792	
	Name of Person	Area Coo	de Daytime Tele	phone Number
	STREET/COURIER ADDRI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27
Enclose	ed is a check for the following a	mount:		
5 70.	00 Filing Fee	ling Fee & C e of Status	\$78.75 Filing Fee & Certified Copy	S87.50 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.

	able in Florida, enter alternate corporate na	_ ime :	adopted for the purpose of transacting business in Florida)		
Delaware		_ 3.	83-2715711		
(State or country under the law of which it is incorporated November 15, 2018 (Date of incorporation) Upon filing			3. (FEI number, if applicable) Perpetual 5. (Date of duration, if other than perpetual)		
851 NE 1st Ave,	(SEE SECTIONS 607.1501 & 60 Unit 908, Miami, FI 33132	17.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
			al office address)		
Name and stree	t address of Florida registered agent: (Corporation Service Company		55 :		
3.7					
Name: fice Address:	1201 Hays Street		10		
Name: fice Address:	1201 Hays Street Tallahassee				
fice Address: Registered age ving been name	Tallahassee (City) nt's acceptance: 2d as registered agent and to accept see	rvio	. Florida 32301 Cip code) Ce of process for the above stated corporation at the ment as registered agent and agree to act in this capa		

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. Names and business addresses of officers and/or directors:

A. DIRE	CTORS
Chairman:	
Address: _	
_	
Vice Chair	nan:
_	
Director: _	Ahmed Elsayyad - 851 NE 1st Ave, Unit 908, Miami, Fl 33132 and Ryan Junee - 18117 Biscayne Blvd, #3022, Miami,
.ddress: _	TL 33160
)irector:	Chase Feiger - 3115 Fontana Drive, Unit 1, Austin, TX 78704 and Raju Rishi - 303 Adams Ct., Manalapan, NJ 07726
- OFFIC	FRS
	Ahmed Elsayyad
5	LNE 1st Ave. Unit 908. Miami. El 33132
duress	7.12 /36/100, Oline 700, Milanii, 11 33132
ica Pracida	Chief Executive Officer - Chase Feiger
1	ent:
uuress:	15 Folialia Diffe, Olif 1, Austin, Ex 78704
	Ahmed Elsayyad
5	I NE 1st Ave, Unit 908, Miami, Fl 33132
aaress:	
OTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.
· — 1	limed Essayyad
true and	Signature of Director or Officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein that he or she is aware that false information submitted in a document to the Department of State constitutes
imid degi	ee felony as provided for in s.817.155, F.S. Elsayyad, President
	(Typed or printed name and capacity of person signing application)

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RISE HEALTHCARE TECH, 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 FIFTEENTH DAY OF SEPTEMBER, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RISE HEALTHCARE TECH, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF NOVEMBER, A.D. 2018.

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

at for delaware gov/aut

Authentication: 204163932

Date: 09-15-21