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2022 JAN IO AM 9: IL SECRETARY OF STATE ALLAHASSEE, FLORIDA

TAILITU AM 9:

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: Radom Corporation		
	corporation - r	nust include suffix
Dear Sir or Madam:		
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to tran	Good Standin	g" and check are submitted to register the
Please return all correspondence concerning	this matter to	the following:
Janet Daniels		
	Name of Per	son
Radom Corporation		
	Firm/Compa	ny
1560 Sawgrass Corporate Pkway, Suite 494		
	Address	
Sunrise, FL 33323		
	City/State and	Zip code
jdaniels@radomcorp.com		
E-mail address: (1	o be used for	future annual report notification)
For further information concerning this matt	er. please call:	
Janet Daniels	()	830-8624
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 DEPARTS \$70.00 Filing Fee S78.75 Filing For Certificate of S	ARTMENT OF	F STATE 78.75 Filing Fee & S87.50 Filing Fee, ertified Copy 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 na			iess in Florida)		
Delaware		. خ.	20-2915298			
(State or country under the law of which it is incorporated))	(FEI number, if applicable)			
		5.				
(Date of incorporation)			(Date of duration, if other than perpetual)			
N/A						
			Florida, if prior to registration) 02, F.S., to determine penalty liability)			
N27W23676 Pau	Rd., Wisconsin, MI 53072 Pewaukee, W	T 530	072			
- 	(Principal	offic	ee street address)			
 .	(Current ma	ailinį	g address, if different)			
Name and <u>stree</u>	<u>et address</u> of Florida registered agent: (Roman Bensen	P.O	. Box <u>NOT</u> acceptable)	2022 JAN 10 SECRE WAY TALLAHASS		
fice Address:	1560 Sawgrass Corporate Pkway, Suite	494		SSES VISY O		
_	Sunrise		, Florida	AM 9: !I		
	(City)		(Zip code)	DRIFT		
Registered age	ent's acceptance:			A A		
•	ed as registered agent and to accept se	ervic	e of process for the above stated corpo	oration at the pla		
			ent as registered agent and agree to a lative to the proper and complete perfo	ct in this capacity		

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.

A. DIRECTORS								
■ Chairman	Name:	□ Chairman	Name: Jovan Jevtic					
□Vice Chairman	Address:	□ Vice Chairman	Address: N27W23676 Paul Rd.					
Director	Suite 494	□Director	Pewaukee, WI 53072					
□President	Sunrise, FL 33323	□President						
□Vice President		□Vice President						
□Secretary	□Treasurer	Secretary	□Treasurer					
□Other	Other	Other	Other					
□Chairman	Name:	□Chairman	Name:					
□Vice Chairman	Address: 1560 Sawgrass Corp Pkway	□Vice Chairman	Address:					
■Director	Suite 494	□Director						
□President	Sunrise, FL 33323	□President						
□Vice President		□Vice President						
Secretary	□Treasurer	□Sccretary	□Treasurer					
Other	□ Other	□Other	□Other					
□ Chairman □ Vice Chairman ■ Director ■ President □ Vice President □ Secretary □ Other	Ashok Menon Name:	□ Chairman □ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other	Name:					
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								

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.

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RADOM 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 FIFTEENTH DAY OF NOVEMBER, A.D.

2021.

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

6

Authentication: 204692185

Date: 11-15-21

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