

F220000001043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

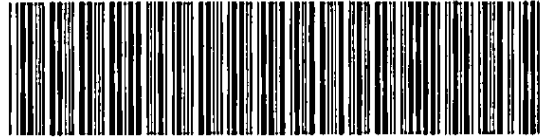
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FEB 8 2021
STATE
OFFICE

S. HAWKES
FEB - 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 20, 2021

BIKASH DEVKOTA
8814 IRMASTONE WAY
ORLANDO, FL 32814

SUBJECT: NON-RESIDENT NEPALIS NATIONAL COORDINATION COUNCIL
OF USA INCORPORATED
Ref. Number: W21000138821

We have received your document for NON-RESIDENT NEPALIS NATIONAL COORDINATION COUNCIL OF USA INCORPORATED and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The money amount and written amount on the check is unacceptable. It should read as \$96.25, Also the listed in line of the document and the certificate do not match. The certificate also does not match what is listed in the document as it is a certificate from Colorado and the documents state Tennessee. Please call me at 850-245-6908 before resending the documents to ensure everything is correct.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 621A00025504

www.aunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Non-Resident Nepali Association National Coordination Council of USA, Corp
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Bikash Devkota

Name of Person

Non-Resident Nepali Association National Coordination Council of USA, Corp

Firm/Company

8814 IRMASTON WAY

Address

ORLANDO/FL 32817

City/State and Zip Code

treasurer@nrmusa.org ✓

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

For further information concerning this matter, please call:

Bikash Devkota

at (407) 4531732

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*


1. Non-Resident Nepali Association National Coordination Council of USA, Corp
(Name of corporation; must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. TENNESSEE 3. 62-1850599
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 01/30/2001 5. Perpetual
(Date of Incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 4409 KIRK BROOK, NASHVILLE, TN 37221
(Principal office street address)

(Current mailing address, if different)
8. NON PROFIT CHARITY WORKS
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: BIKASH DEVKOTA
Office Address: 8814 IRMASTON WAY
ORLANDO, Florida 32817
(City) (Zip Code)

RECEIVED
STATE
JAN 31 12:12 PM '01
10. **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.



(Registered agent's signature)
11. 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.

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

A. DIRECTORS

☐ Chairman Name: Buddi S Subedi
☐ Vice Chairman Address: 3045 Winnipeg St.,
Menasha, WI 54952
☐ Director _____
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Anjan K. Chaulagai
☐ Vice Chairman Address: 35-06 73RD STREET,
JACKSON HEIGHTS, NY 11372
☐ Director _____
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Rajeev Shrestha
☐ Vice Chairman Address: 12634 Shorevista Dr.
Indianapolis, IN 46236
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

NOTE: 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.

13. Rajeev Shrestha Digitally signed by Rajeev Shrestha
Date: 2022.01.28 14:16:22 -05'00'
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. RAJEEV SHRESTHA, TREASURER -Non-Resident Nepali Association National Coordination Council of USA, Corp
(Typed or printed name and capacity of person signing application)



Tre Hargett
Secretary of State

**Division of Business Services
Department of State**

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

SURYA M. TIWARI
IDLEWILD ROAD
ESISON, NJ 08817

December 22, 2021

Request Type: Certificate of Existence/Authorization
Request #: 0451983

Issuance Date: 12/22/2021
Copies Requested: 1

Document Receipt

Receipt #: 006789208

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3820641377

\$20.00

Regarding: Non Resident Nepali Association National Coordination Council of USA

Filing Type: Nonprofit Corporation - Domestic

Control #: 402559

Formation/Qualification Date: 01/30/2001

Date Formed: 01/30/2001

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: DAVIDSON COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Non Resident Nepali Association National Coordination Council of USA

* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

* has filed the most recent annual report required with this office;

* has appointed a registered agent and registered office in this State;

* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

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