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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Drishtee Foundation

Certificate of Status	0
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Corporate Filing Menu

S. FRANKLIN

Hel MAY 19 2022

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. Drishtee Foundation

(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.)

Drishtee Foundation Inc.

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

2. India

(State or country under the law of which it is incorporated)

3. 98-1500324

(FEI number, if applicable)

4. 3/31/2021

(Date of Incorporation)

5. Perpetual

(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. 7901 4th St N STE 300 St. Petersburg FL 33702

(Principal office street address)

7901 4th St N STE 300 St. Petersburg FL 33702

(Current mailing address, if different)

8. _____
The purpose of the Corporation is to engage in any lawful act or activity for which corporations may be organized under the laws of the State of Florida
(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: Registered Agents Inc.

Office Address: 7901 4th St N STE 300

St. Petersburg

(City)

Florida 33702

(Zip Code)

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.

Bill Hume

(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.

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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: Nitin kumar Gachhayat
☐ Vice Chairman Address: _____
☒ Director 7901 4th St N STE 300
☐ President St. Petersburg FL 33702
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Shailesh Kumar Thakur
☐ Vice Chairman Address: 7901 4th St N STE 300
☐ Director St. Petersburg, FL 33702
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Mamta Mishra
☐ Vice Chairman Address: 7901 4th St N STE 300
☐ Director St. Petersburg, FL 33702
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Suyash Ramteke
☐ Vice Chairman Address: 7901 4th St N STE 300
☒ Director St. Petersburg, FL 33702
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Sarika Ramteke
☐ Vice Chairman Address: 7901 4th St N STE 300
☐ Director St. Petersburg, FL 33702
☐ 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 info when filing your Florida Department of State Annual Report form.

13. Nitin Kumar Gachhayat
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Nitin Kumar Gachhayat-Director
(Typed or printed name and capacity of person signing application)



**GOVERNMENT OF NCT OF DELHI
OFFICE OF THE DISTRICT MAGISTRATE, NEW DELHI DISTRICT
12/1, JAM NAGAR HOUSE, SHAHJAHAN ROAD, NEW DELHI-
110011**

No.F. ROS/ ND/45468/2003/3472


Dated: 28/03/2022

CERTIFICATE

I, Parmod Kumar, SDM (HQ/ROS), do hereby certify that "Drishtee Foundation" has been registered under Societies Registration Act, 1860 vide registration No.45468/2003. The society has submitted all the audited report and balance sheet till 31.03.2021 and complied under section 4 of Societies Registration Act, 1860.

This certificate is issued on the basis of available information




(PARMOD KUMAR)
SDM (HQ/ROS)
NEW DELHI DISTRICT

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