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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. FRANKLIN
JUN 0 9 2022

COVER LETTER

	gistration Section vision of Corporations								
SUBJECT	Γ: LAW OFFICE: OF OKAN S	ENGUN, PA							
Name of corporation - must include suffix									
Dear Sir or	Madam:								
"Certificate	ed "Application by Foreign Control of Existence," or "Certificate denced foreign corporation to transport to the control of the corporation to the	of Good Stan	ding" and check are submitte						
Please retui	rn all correspondence concerni	ng this matter	to the following:						
MYRA RAI	BANAL								
		Name of I	Person						
YOUR NEVADA CORPORATE SOLUTIONS									
	•	Firm/Com	pany						
6920 S CIM	ARRON RD STE 100			2022 11111 - 6					
		Addre	ess	PH					
LAS VEGAS, NV 89113									
		City/State at	nd Zip code	w					
myra@your	nevadacpa.com								
	E-mail address	(to be used f	or future annual report notifi	ication)					
For further	information concerning this m	atter, please c	all:						
MYRA RABANAL		at (369-2504						
Na	ame of Person	Area Code	e Daytime Telephone	e 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						
	s a check for the following amos check payable to: FLORIDA DE Filing Fee	PARTMENT g Fee &		387.50 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.

	OF OKAN SENGUN, PROFESSIONA lable in Florida, enter alternate corporate nar	me adopted for the purpose of transacting business in Florida)	-
CALIFORNIA		3. (FEI number, if applicable)	_
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)	
08/08/2013		5. PERPETUAL (Date of duration, if other than perpetual)	_
(Dat	e of incorporation)	(Date of duration, if other than perpetual)	
			_
	(SEE SECTIONS 607.1501 & 607	s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	
837 TURK STR	EET', SAN FRANCISCO, CA 94102		_
	(Principal o	office street address)	
6920 S CIMARI	RON RD STE 100, LAS VEGAS, NV 8911	3	26
	(Current mai	iling address, if different)	77
Name and stre	et address of Florida registered agent: (F OKAN SENGUN	P.O. Box NOT acceptable)	2022 JUN -6 PH
Office Address:	1255 COLLINS AVE #503		<u>工</u>
	МІАМІ ВЕАСН	, Florida 33139 (Zip code)	7. 32
	(City)	(Zip code)	•
	ent's acceptance:	vice of process for the above stated corporation at the	nlace

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]:

A. DIRECTORS					
Chairman	Name: OKAN SENGUN	Chairman	Name:		
☐Vice Chairman	Address:	☐Vice Chairman	Address:		
Director	1255 COLLINS AVE #503	□Director			
President	MIAMI BEACH, FL 33139	☐ President		<u> </u>	
□Vice President		☐Vice President			
Socretary	☐ Treasurer	OSecretary		☐Treasurer	
□ Other		□ Other		□Otber	
□ Chairman	Name:	Chairman	Name;		
OVice Chairman	Address:	□Vice Chairman	Address:		
☐ Director		Director			
□President		President			
□ Vice President		□Vice President			
Secretary	() Treasurer	Secretary		☐Treasurer	
Other		Other		□ Other	
					1022
☐ Chairman	Namo:	□ Chairman	Name:		JU;
□Vice Chairman	Address:	□Vice Chairman	Address:		6
Director		□Director			<u> </u>
President		□President			ن. نا
□Vice President		□Vice President	_		_
Secretary		Secretary		☐Treasurer	
[]Other		Other		Other	
Important Notice: individuals may b	Use an attachment to report profe than six (6). The attachment do report profe than six (6). The attachment do the index when filing your Florida Department Signature of Director of Signature of Signature of Director of Signature of Signature of Director of Signature of Signatur	nt of State Annual R	ed for reporting p eport form.	nurposes only. Non-in	dexed
she is aware that it s.817.155, F.S.	ector signing this document (and who is listed in number false information submitted in a document to the Depart	r 11 above) affirms to ment of State constitu	hat the facts state utes a third degre	nd herein are true and one felony as provided o	that he or for in
13. OKAN SEN	GUN (Typed or printed name and capacity of personal capacity of persona	ve signing analication	<u> </u>		
	(Tables of birmen timine and enhances of herse	argume abbreamor	"7		



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name:

LAW OFFICE OF OKAN SENGUN, PC

Entity No.:

3594507

Registration Date: 08/08/2013

STOCK CORPORATION - CA - PROFESSIONAL

Entity Type: Formed In:

CALIFORNIA

Status:

ACTIVE (GOOD STANDING)

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.





IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of Aற்றி 29, 2022.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 007626722

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.



May 23, 2022

MYRA RABANAL 6920 S CIMARRON RD STE 100 LAS VEGAS, NV 89113 US

SUBJECT: LAW OFFICE OF OKAN SEGNUN, PA

Ref. Number: W22000067902

We have received your document for LAW OFFICE OF OKAN SEGNUN, PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 222A00011738

RECENTED JUN COLLET