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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ellandaven C	^ ^ ^
SUBJECT: Ellandaven C Name of corporation -	must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for A "Certificate of Existence." or "Certificate of Good Standiabove referenced foreign corporation to transact business	ing" and check are submitted to register the
Please return all correspondence concerning this matter to	
Raymond Rosado Name of Pe	
Name of Pe	erson
Ellandaven Corp	
/ Firm/Comp	any
6885 Paola Court	s 7 7 7
Addres	s
Vero Beach FL 3 City/State and ellandaven og mail.com E-mail address: (to be used for	3967
City/State and	J Zip code
ellandaven ogmail.com	7
E-mail address: (to be used for	r future annual report notification)
For further information concerning this matter, please cal	II:
Raymond Rosado at (917 Name of Person Area Code) 365-3747
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 DEPARTMENT (\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	OF STATE \$78.75 Filing Fee & S87.50 Filing Fee, Certified 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 unavailable in Florida, enter alter	nate corporate name adop	ted for the purpose of transacting h	ousiness in Florida)	
New York	3	45-554504	19	
(State or country under the law of which	ate or country under the law of which it is incorporated) (FEI number, if applicable)			
. 6/19/12	5	Perpetual		
(Date of incorporation)		(Date of duration, if other tha	n perpetual)	
	\sqrt{A}			
(Date first		rida, if prior to registration)		
		S., to determine penalty liability)	1	
(SEE SECTION	15 607.1501 & 607.1502, 1 Direcurse Sui	i.s., to determine penalty liability) 1e 3, Bronx, NY		
(SEE SECTION	'S 607.1501 & 607.1502, I	i.s., to determine penalty liability) 1e 3, Bronx, NY		
(SEE SECTION	15 607.1501 & 607.1502, 1 Direcurse Sui	i.S., to determine penalty liability) $\frac{1e \ 3}{eet} \frac{Bronx}{eet} \frac{NY}{eet}$		
(SEE SECTION	(Current mailing add	F.S., to determine penalty liability) F.S., to determine penalty liability)	1045/ 2022 JUN	
SEE SECTION 557 Grand Co	(Current mailing add	F.S., to determine penalty liability) He 3, Bronx, NY reet address) dress, if different) ox NOT acceptable)	2022 JUN 30	
Name: Name: (SEE SECTION) (SEE SECTION) (SEE SECTION) (SEE SECTION)	(Current mailing adgistered agent: (P.O. Bo	F.S., to determine penalty liability) He 3, Bronx, NY reet address) dress, if different) ox NOT acceptable)	2022 JUN 30 AM	
SEE SECTION S. Same and street address of Florida reg Name: 100 Ney Office Address: 1517 Juffi	(Current mailing adgistered agent: (P.O. Bo	E.S., to determine penalty liability) He 3, Bronx, NY reet address) dress, if different) ex NOT acceptable) P.A.	2022 JUN 30	

9. 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)

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: Raymond Rosado	□ Chairman	Name:				
□Vice Chairman	Address: 6885 Paola Court	□Vice Chairman	Address:	· · · · · · · · · · · · · · · · · · ·			
□Director	Vero Beach, FL 31967	□Director					
President		□President					
□Vice President		□Vice President					
☐Secretary	□Treasurer	☐ Secretary		□Treasurer			
Other	□ Other	□Other		□Other			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary		□Treasurer			
□Other	□Other	□Other		□Other			
□Chairman	Name:	□Chairman	Name:	·			
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	☐ Treasurer	☐ Secretary		□Treasurer			
□Other	□Other	□Other		□Other			
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.	Signature of Director o	r Officer					
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.							
13. Raymond Rosado - President (Typed or printed name and capacity of person signing application)							

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time o certificate, the following entity information is reflected:

Entity Name:

ELLANDAVEN CORP

DOS ID Number:

4260588

Entity Type:

DOMESTIC BUSINESS CORPORATION

Entity Status:

EXISTING

Date of Initial Filing with DOS:

06/19/2012

Statement Status:

PAST DUE DATE

Statement Due Date:

06/30/2014

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of Stat at the City of Albany, on May 13, 2022 at 01:57 P.M.

Brandon C Hughan

ROBERT J. RODRIGUEZ, Secretary of State

By Brendan C. Hughes

Executive Deputy Secretary of State

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