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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : Vcorp Services, LLC
Account Number : 120096700067
Phone : (845) 425-0077
Fax Number : (845) 418-3188

2023-01-04 14:58:25

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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: _____

2023

FOREIGN PROFIT/NONPROFIT CORPORATION
GUESTY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$720.00

S. FRANKLIN
JAN - 5 2023

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.*

1. GUESTY, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. DE 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/26/2013 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 11/01/2022
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 440 N Barranca Ave #9720 LOVINA, CA 91723
(Principal office street address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Vcorp Services, LLC
Office Address: 1200 South Pine Island Road
Plantation . Florida 33324
(City) (Zip code)

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.



Mimi Sank

(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.

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: AMIAD SOTO

☐ Vice Chairman Address: _____

☒ Director 10 10 MERKAZ BAALAY MELAHA

☐ President TEL AVIV 63823 ISRAEL

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other CEO ☐ Other _____

☐ Chairman Name: Dan O'Keefe

☐ Vice Chairman Address: _____

☒ Director 440 N Barranca Ave #9720

☐ President Covina, CA 91723

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: ALEXANDER KONOPLYASTY

☐ Vice Chairman Address: _____

☒ Director 8 SADOVAYA KUDRINSKAYA ULITSA

☐ President MOSCOW 12324 RUSSIA

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Philip David Aber

☐ Vice Chairman Address: 2 Kaplan St.

☒ Director Tel Aviv 6473403 Israel

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other CFO ☐ Other _____

☐ Chairman Name: NATALIE REFUAH

☐ Vice Chairman Address: _____

☒ Director 12 ABBA EBAN AVENUE

☐ President HERZLIYA 64739 ISRAEL

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: DAVE EVANS

☐ Vice Chairman Address: _____

☒ Director 340 S LEMON AVENUE 9720

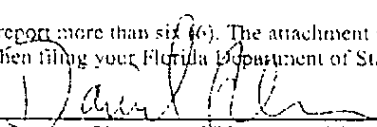
☐ President WALNUT CA 91789 USA

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ 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 or 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. Philip David Aber - CFO
(Typed or printed name and capacity of person signing application)

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GUESTY, INC." 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 TWENTY-FIRST DAY OF NOVEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GUESTY, INC." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF NOVEMBER, A.D. 2013.


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

30:11:11 K-... (73)



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SR# 20224068017

You may verify this certificate online at corp.delaware.gov/authver.shtml
Jeffrey W. Bullock, Secretary of State

Authentication: 204903986

Date: 11-21-22