Florida Department of State

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(((H24000195069 3)))



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FOREIGN PROFIT/NONPROFIT CORPORATION

REREHANI & CO., CERTIFIED PUBLIC ACCOUNTANTS, P.C. CORP.

Certificate of Status	0
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K. SALY





June 5, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GERALD WEINBERG, P.C.

SUBJECT: R. REHANI & CO., CERTIFIED PUBLIC ACCOUNTANTS, P.C. P.A.

REF: W24000084274

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

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

Ariel Jones Regulatory Specialist II Registration Section FAX Aud. #: H24000195069 Letter Number: 124A00012135

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.

		·	for the purpose of transacting busines	•
· · · · · · · · · · · · · · · · · · ·	New York	3,	13-3712107 (FEI number, if applicable)	
(State or coun	ry under the law of which it is inco-			
	01/13/1993	5	(Date of duration, if other than perp	<u> </u>
(Da	s of incorporation)		(Date of duration, if other than perp	etual)
		07/01/2024		
			a, if prior to registration) ., to determine penalty liability)	
,	1270 Broadwa	ay, Sulte 907, I	New York, NY 10001	
	(F	rincipal office <u>etre</u>	address)	RA J
	(Cı	irrent mailing addre	as, if different)	
	(Cı	urrent mailing addre	es, if different)	W.S.
Name and str	(Co	•		AND SEE
	of address of Florida registered	•		14.335.5.FT
Name:	of address of Florida registered of Darinel Cardenas	agent: (P.O. Box		THASSES FLORIE
	of address of Florida registered	agent: (P.O. Box Apt. 207	<u>NOT</u> acceptable)	THUSSEE FLORID
Name:	of address of Florida registered of Darinel Cardenas	agent: (P.O. Box Apt. 207		THASSES FLORID

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]:

HAUDON 195 NG9 3

A. DIRECTORS

Ha40001950693

Namo: Ranjan Rehanl Chalimen □ Chairman Name: _____ Address: 1270 Broadway, Suite 907 □Vice Chaleman ☐Yles Chairman Address: New York, NY 10001 □D!rector Director President . ☐ President □Vice President _____ OVice President -----☐ Secretary ☐ Treasurer ☐ Secretary **OTreasurer** □Other_____ □Other_____ Other ____ □ Othor Name: Rishi Rehani □ Chairman □ Chalrman UVice Chairman Address: 1270 Broadway, Suite 907 ☐Vice Chairman Address: _ New York, NY 10001 ☐ Director ODirector | □President □President ☑ Vice President ☐ Vice President ☐ Scoretary Treasurer Secretary ☐Treasurer □Other______. □Other._____ Other____ □Other_____ Name:____ □ Chairman □Chairman Name: □Vice Chairman Address: ☐ Vice Chairman Address: _____ □ Director □ Director ☐ President President ☐ Vice President ☐ Vice President ☐ Secretary Treasurer □Scoretary Trossurer 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. 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. Runjan Rehani (Typed or printed name and capacity of person signing application)

Haymoragnaz

STATE OF NEW YORK

DEPARTMENT OF STATE

Cortificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed 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 of this certificate, the following entity information is reflected:

Entity Name:

R. REHANI & CO., CERTIFIED PUBLIC ACCOUNTANTS, P.C.

DOS ID Number:

1693937

Entity Type;

DOMESTIC PROFESSIONAL SERVICE-CORPORATION

Entity Status:

EXISTING

Date of Initial Filing with DOS:

01/13/1993

Statement Status:

CURRENT

Statement Due Date:

01/31/2025



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



WITNESS my hand and official scal of the Department of State, at the City of Albany, on June 03, 2024 at 04:16 P.M.

WALTER T. MOSLEY Secretary of State

Brandon Cr Higher

BRENDAN C. HUGHES Executive Deputy Secretary of State

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