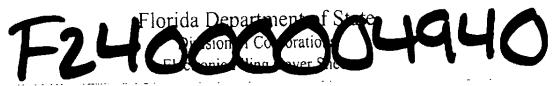
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Division of Corporations



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(((H24000317709 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400 Fax Number : (302)645-1280

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

Email	Address:	
CILIGATE	AUUI COO.	

THE SECTION OF THE TOWN OF THE SECTION OF THE SECTI

FOREIGN PROFIT/NONPROFIT CORPORATION SARDINEAI CORP.

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$78.75

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(((H24000317709 3)))

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SARDINEAL CO		VOLUMENT OF ODDING VERNA "		
(Finter name of co "Inc.," "Co.," "Co	orporation; must include "INCORPORATED." "Corp." "Inc." "Co." or "Corp.")	QMPANT, COMPONATION.		
/If name mayaila	ble in Florida, enter alternate corporate name ado	pted for the purpose of transacting business in Florida	<u></u>	
	\$.4	-5138676		
Delaware 3. (State or country under the law of which it is incorporated)		(FEI number, if applicable)		
(i)ate	of incorporation)	(Date of duration, if other than perpetual)	 -	
09.13/24			 -	
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502.	orida, if prior to registration) F.S., to determine penalty liability)		
382 NF 191st Str	not #5\$243 Minmi #1 33179,3899			
	(Principal office §	dreet address)		
382 NE 191st Str	reet, #58243, Miami, FL 33179-3899			
	(Current mailing a	ddress, if different) lox NOT acceptable)		
Name and street	et address of Florida registered agent; (P.O. H	iox NOT acceptable)		
Name:	Registered Agents Inc.	<u> </u>	; ; ,	
	7901 4th Street N. Ste 300	:-	7.5	
ffice Address:	St. Petersburg			
	7.0.1.2.0.1.0.0.0.0	Florida (Zip code)	చ్	
	(City)			
	(City)			
mine bear was	(City) ent's acceptance: and as emistared quent and to accept service.	of process for the above stated corporation at th	he place	
wing been nam	(City) ent's acceptance: ned as registered agent and to accept service caphication. I hereby accept the appointmen	of process for the above stated corporation at the above registered agent and agree to act in this ca	расиу.	
wing been nam signated in this other agree to c	(City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointmen omply with the provisions of all statutes rela	it as registered agent and agree to act in this ca tive to the proper and complete performance of	расиу.	
aving been namesignated in this arther agree to c	(City) ent's acceptance: ned as registered agent and to accept service caphication. I hereby accept the appointmen	it as registered agent and agree to act in this ca tive to the proper and complete performance of	расиу.	
aving been namesignated in this enter agree to c	(City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointmen omply with the provisions of all statutes rela	it as registered agent and agree to act in this ca tive to the proper and complete performance of	расцу.	

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]:

(((11240003177093)))

A. DIRECTORS							
TChairman	Supranamaya Ranjan Name:		Name:				
□ Vice Chairman	Address: 382 NE 191st Street.	□Vice Chairman ■Director □President	382 NE 191st Street. Address: #58243				
∄ Director	#58243						
≡ President	Miami, FL 33179-3899		Miami, FL 33179-3899				
ZVice President		ElVice President					
■ Secretary	Treasurer = 1	☐Secretary	□ Freusurer				
■Other	Other	(DOther	COther				
	Benjamin Cook		Aditya Goel				
II Chairman	Name:						
T.Vice Chairman	Address: 382 NE 191st Street	□Vice Chairman	382 NF, 191st Street. Address:				
TDirector	#58243	₩Director					
President	Miami, FL 33179-3899	©President	Miani, EL 33179-3899				
D Vice President		□Vice President					
©Secretary	Trepsurer	III Secretary	☐ Ireasurer				
		□ Other	COther				
_ Chairman	Ross Fubini		Angela Strange				
_	382 NE 191st Street,		382 NE 191st Street.				
	#58243		#58243				
■Director	Miami, FL 33179-3899	⊕ Director □ President	Miami, FL 33179-3899				
II President							
☐ Vice President		□Vice President					
II Secretary	23 Treasurer	T.Secretary	🖺 (reasurer				
Other		COther	Other				
Important Notice: individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department	chment will be image nt of State Annual Ro	ed for reporting purposes only. Non-indexed eport form.				
12.	d) of	. ()15					
Signature of Director or Officer The officer or director signing this document tand who is fisted 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 \$817.155, L.S.							



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SARDINEAI CORP." 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 EIGHTEENTH DAY OF SEPTEMBER, A.D. 2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SARDINEAL CORP."

WAS INCORPORATED ON THE TWELFTH DAY OF MARCH, A.D. 2020.

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

7897822 8300 SR# 20243715844

You may verify this certificate online at corp.delasvare.gov/authver.shtml

Authentication: 204417776

Date: 09-18-24