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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration : Division of C				
SUBJECT: OSYK.	A CORPORATION			
	Name	of corporation - n	nust include suffix	
Dear Sir or Madam:				
	nce," or "Certificate	of Good Standin	horization to Transact I g" and check are submi n Florida.	
Please return all corre	espondence concern	ing this matter to	the following:	
Adam Zion Elisha				
	<u>-</u>	Name of Per	son	
OSYKA CORPORATI	ON			
		Firm/Compar		
2385 NW Executive Co	enter Dr #100			
		Address		
Boca Raton, FL 33431				
		City/State and 2	Zip code	
eDatafinancial@gmail.	com		•	
	E-mail addres	s: (to be used for t	uture annual report not	ification)
For further information	on concerning this n	natter, please call:		
Adam Zion Elisha		at ()	212-3370	
Name of Per	son	Area Code	Daytime Telepho	ne 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 Please make check pays \$\infty\$ \$70.00 Filing Fee		EPARTMENT OF ing Fee &		☐ \$87.50 Filing Fee, Certificate of Status of 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.

OSYKA CORP	ORATION				
(Enter name of c	corporation; must include "INCORPORATED," lorp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATI	ION."		
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transac	cting business in Flor	rida)	
Nevada, USA 3		84-4830073			
(State or country under the law of which it is incorporated) 09/26/1997		(FEI number, if applicable)			
(Date of incorporation)		(Date of duration, if other than perpetual)			
)					
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		bility)		
2385 NW Execu	tive Center Dr #100. Boca Raton, FL 33431				
·	(Principal offic	e <u>street</u> address)			
			1		
	(Current mailing	address, if different)	Ţ		
			Ö	- .	
. Name and <u>stree</u>	et address of Florida registered agent: (P.O.	Box NOT acceptable)	2003	•	
Name:	Adam Zion Elisha		7.27 05	1	
Office Address:	2385 NW Executive Center Dr #100				
				1444	
	Boca Raton		P		
	Boca Raton (City)	, Florida	7 2		
Pegistered ag	(City)	, Florida	PH 2: 37		
		(Zip code)	ted corporation at		
Aaving been nam lesignated in this	(City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme	(Zip code) e of process for the above sta	ited corporation at gree to act in this.	the place capacity.	
Having been nam lesignated in this urther agree to c	(City) ent's acceptance: ned as registered agent and to accept service	Zip code) (Zip code) e of process for the above sta ent as registered agent and a lative to the proper and comp	ited corporation at gree to act in this.	the place capacity.	
Having been nam lesignated in this further agree to c	(City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes re-	Zip code) (Zip code) e of process for the above sta ent as registered agent and a lative to the proper and comp	ited corporation at gree to act in this.	the place capacity.	
Having been nam lesignated in this further agree to c	(City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes re-	Zip code) (Zip code) e of process for the above sta ent as registered agent and a lative to the proper and comp ition as registered agent.	ited corporation at gree to act in this.	the place capacity.	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS Name: ____Adam Zion Elisha Name: □ Chairman □ Chairman □Vice Chairman Address: □Vice Chairman Address: 2385 NW Executive Center Dr #100 □ Director □ Director Boca Raton, FL 33431 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 ☐Treasurer ☐ Secretary ☐ Secretary □Treasurer □ 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. Adam 2 Clisha 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. Adam Zion Elisha

SECRETARY OF STATE



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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I. FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence **OSYKA CORPORATION** as a DOMESTIC CORPORATION (78) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 09/26/1997, and in good standing in this State.

Certificate Number: B202410025014672

You may verify this certificate

online at https://www.nvsilverflume.gov/home/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of this State, at my office on 10/02/2024.

FRANCISCO V. AGUILAR Secretary of State