

M 200000007916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100350729161

08/21/20--01019--001 \*\*130.00

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

HKN VENTURES LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SAHIL NANDWANI

Name of Person

HKN VENTURES LLC

Firm/Company

4632 PACIFIC BLVD  
~~1300 N FEDERAL HIGHWAY, SUITE 104~~

Address

LOS ANGELES, CA 90058

~~BOCA RATON, FL 33432~~

City/State and Zip Code

SAHIL@HKNGLOBAL.ORG

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAHIL NANDWANI

Name of Contact Person

at (213) 880-3997

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. HKW VENTURES LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. CALIFORNIA  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 85-0722858  
(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4632 PACIFIC BLVD  
(Street Address of Principal Office)

6. 1300 N FEDERAL HWY, #  
(Mailing Address)

LOS ANGELES, CA 90058

SUITE 206

BOCA RATON, FL 33432

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: HANNA KHOURI

Office Address: 6382 VIA ROSA

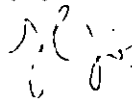
BOCA RATON.

(City)

, Florida 33433  
(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:** **Name and Address:**

☒ Manager Name: SAHIL NAUDWANI

☐ Member Address: 1958 CALAFIA ST

☐ Authorized GLENDAL, CA 91208

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: HANNA KHOURI

☒ Member Address: 6382 VIA ROSA

☐ Authorized BICA RATON, FL 33433

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☐ Manager Name: SURESH NAWDANI

☒ Member Address: 1958 CALAFIA ST

☐ Authorized GLENDAL, CA 91208

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: NAND RAMCHANDANI

☒ Member Address: 400 PEARLE ST

☐ Authorized SUITE 614

Person SAN FRANCISCO, CA 94105

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

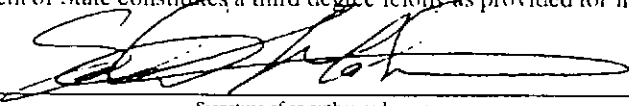
Person \_\_\_\_\_

☐ 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.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

  
\_\_\_\_\_  
Signature of an authorized person

SAHIL NAUDWANI  
\_\_\_\_\_  
Typed or printed name of signer

**State of California**  
**Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME: HKN VENTURES LLC

FILE NUMBER: 202009410908  
FORMATION DATE: 03/31/2020  
TYPE: DOMESTIC LIMITED LIABILITY COMPANY  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The entity is authorized to exercise all of its powers, rights and  
privileges in California.

This certificate relates to the status of the entity on the Secretary  
of State's records and does not reflect documents that are pending  
review or other events that may affect status.

No information is available from this office regarding the financial  
condition, status of licenses, if any, business activities or  
practices of the entity.



IN WITNESS WHEREOF, I execute this  
certificate and affix the Great Seal  
of the State of California this day of  
July 24, 2020.

ALEX PADILLA  
Secretary of State