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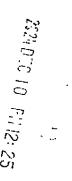
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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JAN 09 2025

COVER LETTER

	-	istration Section ision of Corporations					
SHRIEC	CT: Rabata, Inc.						
SOBOLEC	· I ·	Name of Corporation	- must include suffix				
Dear Sir c	or Madam:						
Affairs in	Florida", "Cer	on by Foreign Not for Profit Cificate of Existence", or "Cented not for profit corporation	tificate of Status" and che	eck are submitted to			
Please ret	urn all correspo	ondence concerning this matte	er to the following:				
	Jennifer U	Irban					
		Name of	Person				
	Legal for	Good PLLC					
	5353 Gamble Dr., Suite 320						
		-					
		Addr	ess				
	St. Louis	St. Louis Park, MN 55416					
		City/State and	l Zip Code				
	jenn@lega	llforgood.com					
	E-m	ail address: (to be used for fu	ture annual report notifica	ition)			
For furthe	r information c	oncerning this matter, please	call:				
Jennifer U	Jrban	6	12 284-6441				
	Name of	Person at (rea Code Daytime Tel	ephone Number			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tion porations	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. FL 32301				
		he following amount: to: FLORIDA DEPARTMEN	T OF STATE				
_	00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy			

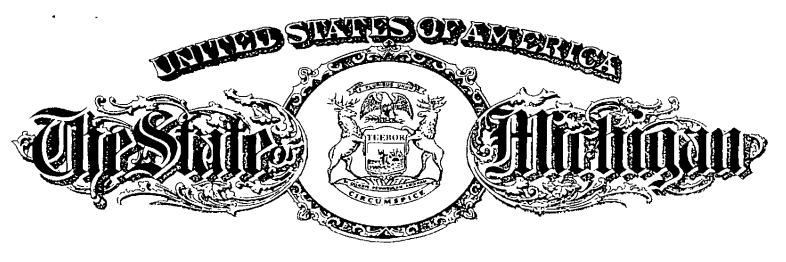
APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

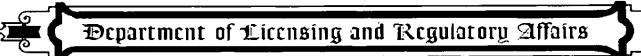
IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

lichigan			s in Florida)
		. 46-4208628	
State or cou	intry under the law of which it is incorpo	3. 46-4208628 (FEI number, if applicable)	
		\$	
(1	(Date of Incorporation) 5. (Date of duration, if other than perporation)		ctual)
are first ∞ox	sucted affairs in Florida if prior to registrat	ion. See sections 617.1501 & 617.1502, F.S. to determine	penalty liability
33 Lexingt	on Ave. N, Arden Hills, MN 55126		
		ipal office street address)	
	(Current	mailing address, if different)	
	·	,	5-7
nrovide el	asses, literature, and spiritual mentorship	on Islamic culture.	:-3
rpose(s) of	corporation authorized in home state or	country to be carried out in the state of Florida)	
• .	. 13 CPI 11 11	A (D.O. D NOT	
me and st	reet address of Florida registered age	nc (P.O. Box NOT acceptable)	
	Northwest Registered Agent LLC		
	1.01m; — 1.mB=		亞
Name:	Northwest Registered Agent LLC		
	. 7901 4th St N. STE 300		5.5
	. 7901 4th St N. STE 300	, Florida 33702 (Zip Code)	<u>လ</u> မာ

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

A. DIRECTOR	ន		Songe & broad				
Chairman	Name: Hazel Gomez	□ Chairman	Name: Soofia Ahmed				
□Vice Chairman	Address: 1658 Waverly St.	■Vice Chairman	Address: 138 S Ellyn Ave.				
Director	Detroit, MI 48238	Director	Glen Ellyn, IL 60137				
□ President		□President					
□Vice President		□Vice President					
Socretary	Treasurer	☐Secretary	∏iсвыша				
□Other:	Other:	☐ Other:	Other:				
	Filero Mouses		Name: Sabriyya Shaw				
Chairman	Name: Filsun Moussa	□ Chairman	Address: 1335 Tutwiler Ave.				
□Vice Chairman	Address: 8890 Sweethorn Dr.	□Vice Chairman	Memphis, TN 38107				
■ Director	Bartlett, TN 38002	Director					
□President		□President					
□Vice President		□Vice President					
☐Secretary	Treasurer	Secretary	□Treasurer				
□Other:		[] Other:					
	Tevveha Svod	□Chairman	Name: Maryum Rasool				
Chairman	Name:	□Vice Chairman	Address: 707 Shady Brook Ln.				
□Vice Chairman	Address:	□ Vice Chairman □ Director	Flushing, MI 48433				
Director	W						
□ President		□President					
□Vice President		☐Vice President					
Secretary	☐Treasurer	☐Secretary					
□Other:	Other:	Other:	Other:				
NOTE: 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. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)							
4. Hazel Gomez, Board Chair (Typed or printed name and capacity of person signing application)							
(Tablet or himself matter of herein) or herein argume ablancement							





Lansing, Michigan

This is to Certify That

RABATA, INC.

was validly Incorporated on January 23, 2014 as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1982 PA 162 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 24120096303

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 4th day of December, 2024.

Linda Clega, Director

Corporations, Securities & Commercial Licensing Bureau