# F25000000873

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



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REPORTED

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FEB 1 3 2025

K. Brumbley

CSC - Tallahassee

CSC 1201 Hays Street

Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 02/13/25 Order #: 1823340-1 Re: Redvanly Corp.

Processing Method: Routine

### TO WHOM IT MAY CONCERN:

#### Enclosed please find:

Application for Certificate of Authority
Amount to be deducted from our State Account: \$78.75 - FL State Account Number: I2000000195
Certificate of Good Standing from State of Incorporation

#### Please take the following action:

File in your office on basis Issue Proof of Filing

#### Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

#### **COVER LETTER**

TO:	Registration Section Division of Corporate			
SURJ	ECT: Redvanly Co	<b>ரு</b> .		
50170		Name of corporation	n - must include suffix	
Dear S	ir or Madam:			
"Certi	ficate of Existence,"	by Foreign Corporation fo or "Certificate of Good Sta orporation to transact busin	nding" and check are sub	ct Business in Florida," mitted to register the
Please	return all correspon	dence concerning this matte	er to the following:	
Thoma	as C. Senter, Esq.			•
		Name o	f Person	
Green	oaum, Rowe, Smith &	Davis LLP		
	· <del></del>	Firm/Co	mpany	
99 Wo	od Avenue South			
		Add	ress	
Iselin.	New Jersey 08830			
		City/State	and Zip code	
tsenter	@greenbaumlaw.com			
	-	E-mail address: (to be used	for future annual report r	notification)
For fu	rther information co	ncerning this matter, please	call:	
Thoma	as C. Senter, Esq.	at (	476-2650	
	Name of Person	Area Co	de Daytime Telep	hone 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	
Please		); FLORIDA DEPARTMEN	T OF STATE  \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & 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.

(If name unav	ailable in Florida, enter alternate corporate	name adopted for the purpose of transactir	ng business in Florida)
2. New Jersey	•	99-2156366	
	intry under the law of which it is incorporate	ted) (FEI number, if ap	oplicable)
4. March 20, 20	)24	5.	
(D	ate of incorporation)	5. (Date of duration, if other	than perpetual)
6.			
		iness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liabil	ity)
271 Cambrid	ige Road, Hillsdale, New Jersey 07642	our 1902, t.o., to determine penalty mass.	,
7		pal office street address)	
	(		
	(Current	mailing address, if different)	
			20
8. Name and <u>s</u> :	reet address of Florida registered agent	: (P.O. Box <u>NOT</u> acceptable)	2025 F
8. Name and <u>stands.</u>	Corporation Service Company	: (P.O. Box <u>NOT</u> acceptable)	2025 FEB
Name	Corporation Service Company	: (P.O. Box <u>NOT</u> acceptable)	2025 FEB 13
_	Corporation Service Company 1201 Hays Street		PILED 2025 FEB 13 PM
Name	Corporation Service Company  1201 Hays Street  Tallahassee	, Florida <sup>32301</sup>	FILED 2025 FEB 13 PM 3:
Name	Corporation Service Company 1201 Hays Street		FILED FILED 2025 FEB 13 PM 3: 58
Name: Office Address  9. Registered	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  agent's acceptance:	, Florida 32301 (Zip code)	3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3
Name: Office Address  9. Registered Having been n	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  agent's acceptance:  amed as registered agent and to accep	, Florida 32301 (Zip code) t service of process for the above state.	ين نب نب d corporation at the place
Name: Office Address  9. Registered Having been n designated in t further agree t	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  agent's acceptance: amed as registered agent and to accepthis application, I hereby accept the apponent of all states.	Florida 32301 (Zip code)  t service of process for the above state pointment as registered agent and agruntes relative to the proper and comple	بن ب
Name: Office Address  9. Registered	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  agent's acceptance:	, Florida 32301 (Zip code)	d carna
Name:  Office Address  Registered  Having been n  lesignated in t  further agree t	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  agent's acceptance: amed as registered agent and to accept his application, I hereby accept the application of all stations with and accept the obligations of	Florida 32301 (Zip code)  t service of process for the above state pointment as registered agent and agruntes relative to the proper and comple	بن ب
Name: Office Address  9. Registered Having been n designated in t further agree t	Corporation Service Company  1201 Hays Street  Tallahassee  (City)  agent's acceptance: amed as registered agent and to accepthis application, I hereby accept the apponent of all states.	Florida 32301 (Zip code)  t service of process for the above state pointment as registered agent and agruntes relative to the proper and comple	بن ب

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

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

A. DIRECTORS								
Choirman	Name: Andrew Redvanly	ClChalrman	Name:					
□Vice Chairman	Address:	[]Vice Chairman	Address:					
■ Director	Jersey City, NJ 07310	Director						
President		☐ President						
□Vice President		□ Vice President						
Secretary	T'ireasurer	Secretary	[]'Treasurer					
Other	Other	□Other	Other					
□ Chairman	Name:	□ Chairman	Name:					
- '	Address:	□Vice Chairman	Address:					
Director		Director						
□ President		□President						
_		□Vice President						
	☐ Treasurer	Secretary	Treasurer					
Secretary		□Other	Other					
□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						
Important Notice: Use an attachment to copor 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 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.  Andrew Redvanly  (Typed or printed name and capacity of person signing application)								
	- (Typed or printed name and capacity of person	. 2.0 P akk	•					

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

#### REDVANLY CORP.

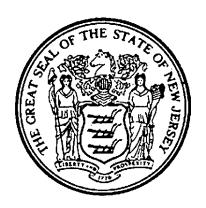
0600373308

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on May 04, 2011.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ANDREW REDVANLY 315 15TH ST APT APT 1908 JERSEY CITY, NJ 07310



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 12th day of February, 2025

Elizabeth Maher Muoio State Treasurer

de so Mun

Certificate Number: 6161599891

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp