

Secretary of State

LLC-5

Application to Register a Foreign Limited Liability Company (LLC)

IMPORTANT — Read Instructions before completing this form.

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed. See Instructions.

Filing Fee - \$70.00

Copy Fees - First page \$1.00; each attachment page \$0.50;

Certification Fee - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to https://www.ftb.ca.gov.

Secretary of State
State of California
202120710242

Filing Number
07/22/2021

Filing Date

https://www.ftb.ca.gov.		This Space For Office Use Only			
1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)					
HANA CLOUD SOLUTIONS	LLC				
1b. California Alternate Name, If Required (See Instructions - Only enter an alternate name if the LLC name in 1a not available in California.)					
2. LLC History (See Instructions - Ensure that the formation date and jurisdiction match the attached Certificate of Good Standing.)					
a. Date LLC was formed in home jurisdiction (MM/DD/YYYY) 6. Jurisdiction (State, foreign country or place where this LLC is formed.) NEW JERSET					
c. Authority Statement (Do not alter Authority Statement) This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2b.					
3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)					
a. Street Address of Principal Executive Office - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Code	
333 STARKE RD	CARLSTADT		4	07072	
b. Street Address of Principal Office in California, If any - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Code	
1401 21ST SUITE R	SACRAMBUTO		CA	95811	
c. Mailing Address of Principal Executive Office, If different than Item 3a	City (no abbreviations)		State	Zip Code	
4. Service of Process (Must provide either Individual OR Corporation.)					
INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full name and California street address.					
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Coo	le
			CA		
CORPORATION - Complete Item 4c only. Only include the name of the registered agent Corporation.					
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 4a or 4b REGISTERED AGENTS INC					
5. Read and Sign Below (See Instructions. Title not required.) By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign on behalf of the foreign LLC.					

Signature

BRIAN KWON

Type or Print Name

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

HANA CLOUD SOLUTIONS LLC 0600442101

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on June 05, 2017.

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:

BRIAN KWON 333 STARKE ROAD CARLSTADT, NJ 07072



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 13th day of July, 2021

Ship Men

Elizabeth Maher Muoio State Treasurer

Certificate Number : 6121016946

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp