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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 22, 2013

EDAYAT SHAHRANI 2203 N LOIS AVE SUITE 900 TAMPA, FL 33607

SUBJECT: ES CONSULTING INC. Ref. Number: W13000016952

We have received your document for ES CONSULTING INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 413A00006861

## COVER LETTER

New Filing Section TO: **Division of Corporations** 

SUBJECT: ES Consulting Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida." "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

| Eday | at | Sn | anr | anı |
|------|----|----|-----|-----|
|      |    |    |     |     |

Name of Person

ES Consulting Inc.

Firm/Company

2203 N. Lois Ave. Suite 900

Address

Tampa, FL 33607

City/State and Zip code

admin@esconsultinginc.com

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

For further information concerning this matter, please call:

Edayat Shahrani

Name of Person

 $\underset{\text{Area Code \& Daytime Telephone Number}}{\text{Area Code \& Daytime Telephone Number}}$ 

#### STREET/COURIER ADDRESS:

New Filing Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

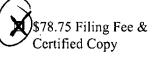
#### MAILING ADDRESS:

**New Filing Section** Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount:

**I** \$70.00 Filing Fee

□ \$78.75 Filing Fee & Certificate of Status



□ \$87.50 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.

| ES Consulting Inc.   | the second of th |
|--|--|
| (Enter name of corporation; must include "INCORPORATI", "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp.")  E. Solution's Consulting   | Inc  |
|  | ine adopted for the purpose of transacting business in Florida)  |
| Delaware : The control of the contro | 3. 26-0548471  |
| (State or country under the law of which it is incorporated). 3/14/2007 (VA) 2012 (DE)   | (Pili number, if applicable) 5 perpetual   |
| (Date of incorporation)  Not applicable  | (Duration: Year corp. will cease to exist or 'perpetual'')   |
|  | ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)   |
| , 2203 N. Lois Ave. Tampa, FL 336  | 07   |
| P. O. Box 8321 Bloomington, IN 47  | The second secon |
| (Current mailing   |  |
| Provide consulting services to org   | ganizations in Florida   |
| (Pornosofs) of cornoration authorized in home state of   | r country to be carried out in state of Florida)   |

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

Edayat Shahrani 2203 N. Lois Ave #900 Office Address: Tampa 33607

10. Registered agent's acceptance:

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

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. Names and business addresses of officers and/or directors:

A. DIRECTORS

| · A. DIR  |  |           |
|---|--|-----------|
|   | ECTORS   |           |
| Chairma   | and the first of the control of the<br>Head of the control of   |           |
|   |  |           |
| Address:  |  |           |
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| - Vice Chi  | airmen:  |           |
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| Address:  |  |           |
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| Director:   |  |           |
| Address   |  |           |
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| Director:   | and the second of the second o |           |
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| S   |  |           |
| B. OFF  | TCERS  |           |
| Presiden  | Edayat Shahrani  |           |
| Address:  | 2203 N. Lois Ave. Suite 900  |           |
|   |  |           |
|   | Tampa, FL 33607  |           |
|   | Tampa, FL 33607  |           |
| Vice Pre  | Tampa, FL 33607  |           |
|   | Tampa, FL 33607  |           |
| Vice Pre  | Tampa, FL 33607  |           |
| Vice Pre  | Tampa, FL 33607  |           |
| Vice Pre. Address: Secretary  | Tampa, FL 33607  |           |
| Vice Pre.<br>Address:   | Tampa, FL 33607  |           |
| Vice Pre. Address: Secretary  | Tampa, FL 33607 sident:  |           |
| Vice Pre<br>Address:<br>Secretary<br>Address:   | Tampa, FL 33607 sident:  |           |
| Vice Pre Address: Secretary Address: Trensure Address:  | Tampa, FL 33607 sident:  |           |
| Vice Pre. Address: Secretary Address: Treasure Address: NOTE:                                   | Tampa, FL 33607 sident:  |           |
| Vice Pre Address: Secretary Address: Trensure Address:  | Tampa, FL 33607  sident:  If necessary, you may attach an addendum to the application listing additional officers and/or directors.  |           |
| Vice Pre Address: Sceretary Address: Trensure Address: NOTE: 13.  The offi                      | Tampa, FL 33607  sident:  If necesspry, you may attach an addendum to the application listing additional officers and/or directors.  Signature of Director or Officer according of the facts stated herein stated in number 12 above) affirms that the facts stated herein   |           |
| Vice Pre Address: Secretary Address: Trensure Address: NOTE: 13.  The offi are true             | Tampa, FL 33607  sident:  If necessary, you may attach an addendum to the application listing additional officers and/or directors.  Signature of Director or Officer cer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes  |           |
| Vice Pre Address: Secretary Address: Trensure Address: NOTE: 13.   The offi are true a third of | Tampa, FL 33607  sident:  If necessary, you may attach an addendum to the application listing additional officers and/or directors.  Signature of Director or Officer cer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes legree felony as provided for in s.817.155, F.S.   |           |
| Vice Pre Address: Secretary Address: Trensure Address: NOTE: 13.  The offi are true a third of  | Tampa, FL 33607  sident:  If necessary, you may attach an addendum to the application listing additional officers and/or directors.  Signature of Director or Officer cer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes  |           |

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# Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ES CONSULTING INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF MARCH, A.D. 2013.

AUTHENTACATION: 0290946

DATE: 03-18-13

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You may verify this certificate online at corp. delaware.gov/authver.shtml