

F150000003870

(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:

W15-96279
R.A. sign. / cert. status

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 24, 2015

RICHARD F. GERRY
1320 EL PARDO DRIVE
TRINITY, FL 34655

SUBJECT: PIVOT VENTURE PARTNERS, INC.
Ref. Number: W15000056279

We have received your document for PIVOT VENTURE PARTNERS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

NEED A CERTIFICATE OF STATUS FROM NEVADA - ORIGINAL CORPORATE CHARTER CERTIFICATE NOT ACCEPTABLE,

Please return 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) 245-6051.

Stacey M Mason
Regulatory Specialist II

Letter Number: 115A00017855

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PIVOT VENTURE PARTNERS, 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:

RICHARD F. GENNY
Name of Person

1320 EL PARDO DRIVE
Firm/Company
Address

TRINITY, FL 34655
City/State and Zip code

RGENNY5712@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD GENNY at (727) 375-2379
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$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.

1. PIVOT VENTURE PARTNERS INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEVADA 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MAY 13, 2015 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1320 EL PARDO DRIVE, TRINITY, FL 34655
(Principal office address)

(Current mailing address, if different)

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

Name: JOHN SWERM

Office Address: 3225 STONRGATE FALLS DR
LAND O' LAKES, Florida 34638
(City) (Zip code)

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TALLAHASSEE, FLORIDA

9. 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.

[Handwritten signature]

(Registered agent's signature)

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 under the law of which it is incorporated.

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

A. DIRECTORS

Chairman: RICHARD F. GENNY

Address: 1320 EL PANDO DRIVE,
TRINITY, FL 34655

Vice Chairman: JOSHUA T. TANAY

Address: 1856 WEST 800 NORTH
FARMINGTON, UT 84025

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: RICHARD F. GENNY

Address: 1320 EL PANDO DRIVE
TRINITY, FL 34655

Vice President: JOSHUA T. TANAY

Address: 1856 WEST 800 NORTH
FARMINGTON, UT 84025

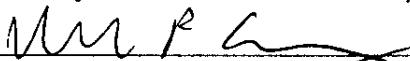
Secretary: JOHN SWERN

Address: 3225 STONEGATE FALLS, DR., LAKE O' LAKES FL

Treasurer: JOSHUA T. TANAY

Address: 1856 WEST 800 NORTH, FARMINGTON, UT 84025

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

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.

13. RICHARD F. GENNY, PRESIDENT

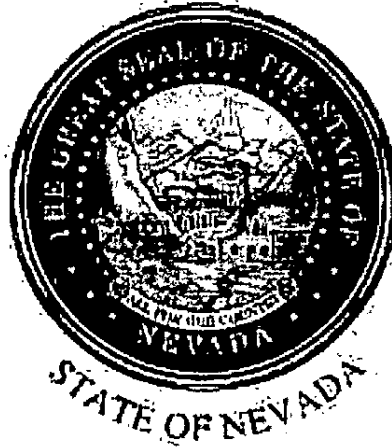
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE
JULIA MOSSETT, FLORIDA

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SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **PIVOT VENTURE PARTNERS, INC**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 13, 2015, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 13, 2015.

BARBARA K. CEGAVSKE
Secretary of State



Electronic Certificate
Certificate Number: C20150813-1773
You may verify this electronic certificate
online at <http://www.nvsos.gov/>