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Florida Department of State
Division of Corporations
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To: Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION
NUANZA INC.

Certificate of Status	0
Certified Copy	0
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

S Warren

MAY 23 2017

**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. NUANZA 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. NEW JERSEY 3. _____
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. AUGUST 1, 2011 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. 8951 SYNERGY DR., STE. 230, MCKINNEY, TX 75070
 (Principal office address)

_____ (Current mailing address, if different)

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


Name: BHARAT BALLIPONGALA

Office Address: 639 ARBOR STATION LN, APT. 83

TALLAHASSEE, Florida 32312
 (City) (Zip code)

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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.


 (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: KEERTHI VEDIRE
Address: 8951 SYNERGY DR., STE. 230
MCKINNEY, TX 75070

Vice Chairman: NEERAJA R. BHIMANAPATI
Address: 8951 SYNERGY DR., STE. 230
MCKINNEY, TX 75070

Director: PARVEENA ARALI
Address: 8951 SYNERGY DR., STE. 230
MCKINNEY, TX 75070

Director: _____
Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: KEERTHI VEDIRE
Address: 8951 SYNERGY DR., STE. 230
MCKINNEY, TX 75070

Vice President: NEERAJA R. BHIMANAPATI
Address: 8951 SYNERGY DR., STE. 230
MCKINNEY, TX 75070

Secretary: NEERAJA R. BHIMANAPATI
Address: 8951 SYNERGY DR., STE. 230, MCKINNEY, TX 75070

Treasurer: PRAVEENA ARALI
Address: 8951 SYNERGY DR., STE. 230, MCKINNEY, TX 75070

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

12. *Keerthi V*
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. KEERTHI VEDIRE, PRESIDENT
(Typed or printed name and capacity of person signing application)

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

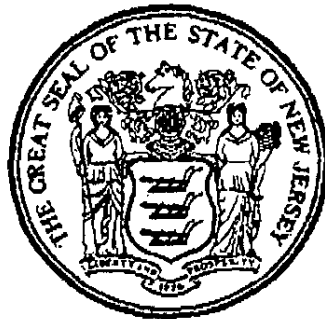
**NUANZA INC.
0101017093**

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 August 01, 2011.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2016

I further certify that the registered agent and office are:

**KEERTI VEDIRE
14 VICTORIA DR
SOMERSET, NJ 08873**



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 22nd day of May, 2017

**Ford M. Scudder
Acting State Treasurer**

Certificate Number : 6079909477

Verify this certificate online at

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