# 7970000005649

TO: Qualification/Tax Lien Section Division of Corporations

SUBJECT: GENESIS BUSINESS SOLUTIONS, 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", 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:

Gangi Reddy Ugender (Name of Person)	970	DIVISE
	CT 27	97 1 0 1 28 1 28 1 28 1 28 1 28 1 28 1 28
Genesis Business Solutions, inc. (Firm/Company)		LED Y OF S
1717 Century Circle S Suite 2	8: 38	TATE
Indiana Polis, INDIANA -46260 (City/State/Zip)		

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Should you need to call someone concerning this matter, please call:

(Name of Person) at (Art

at (317) 471-8792 (Area Code & Daytime Telephone Number)

# **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

# **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

# 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.	GENESIS BUSINESS SOLUTIONS, INCORPORATED  (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of		_
	words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of natural person or partnership if not so contained in the name at present.)	a	
2.	TNDIANA  (State or country under the law of which it is incorporated)  3. 35-2006012  (FEI number, if applicable)	<del></del>	
	. 3		
4.	Ol 31 1997  (Date of Incorporation)  5. PER PETUAL  (Duration: Year corp. will cease to exist o "perpetual")	97.0CT 27 AM 8:38	DIVISION
6.	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	27	);   
7.	1717 CENTURY CIRCLE SOUTH SUITE 2	A. 83	₹PDRA
	INDIANAPOLIS, IN-46260 (Current mailing address)	38	SNOLL
	_		
8.	Contract Software Services For the Clients  (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)		_
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NC acceptable)	T	
	Name: VAMSEE MOHAN SRIKAKOLAPU		
	Office Address: 3412 Primrose Court		
រក	Apt 204, Palmbeach gardens, Florida, 33410 (Zip Code)		
			_
co. reg all	aving been named as registered agent and to accept service of process for the above rporation at the place designated in this application, I hereby accept the appoint a gistered agent and agree to act in this capacity. I further agree to comply with the provist statutes relative to the proper and complete performance of my duties, and I am familied accept the obligations of my position as registered agent.	nent sions	as of
	(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.

SECRETARY OF STATE

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)
A. DIRECTORS (Street address only- P. O . Box NOT acceptable)
Chairman: G. SHIVPAL REDDY
Address: 33 UNION SQUARE, STE 933
UNION CITY, CA-94587
Vice Chairman: G. UGENDER REDDY
Address: 1717 CENTURY CIRCLES, SUITE 2
INDIANAPOLIS, IN-46260
Director: HARI POLAVARAPU
Address: 1713 CENTURY CIRCLES
INDIANAPOLIS, IN-46260
Director:
Address:
B. OFFICERS (Street address only- P. O. Box NOT acceptable)
President: G. SHIVPAL REDDY &
Address: 33 UNION SQUARE, STE 933
UNION CITY, CA-94587
Vice President: G. UGENDER REDDY
Address: 1717 CENTURY CIRCLES, STE 2
INDIANAPOLIS, IN-46260
Secretary: HARI POLAVARAPU
Address: 1713 CENTURY CIRCLES, STEZ  INDIANAPOLIS, IN-46260
INDIANAPOLIS, IN-46260
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional
officers and/or directors.
13. CSignature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. G. UGENDER REDDY (VICE PRESIDENT) (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing application)

## STATE OF INDIANA

# OFFICE OF THE SECRETARY OF STATE

## CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

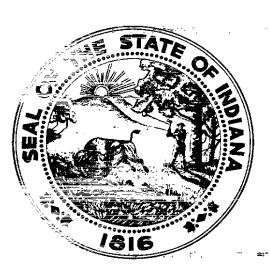
I further certify that records of this office disclose that

# GENESIS BUSINESS SOLUTIONS, INC.

filed Articles of Incorporation on January 31, 1997, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.





In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Sixth day of August, 1997.

Sue anne Silroy, Secretary of State

Deputy

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