# 19900005062

(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:

Office Use Only



400162831664

11/23/09--01002--020 \*\*70.00

ON DEC 18 PM 3: 28

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W09-51740 MD 12/18

## **COVER LETTER**

S)0.00 Filing Fee

☐\$78.75 Filing Fee & Certificate of Status

TO: New Filing Section Division of Corporations	
SUBJECT: Spartan Solution (Name of corporation - must	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authoriz "Certificate of Existence," and check are submitted to register thransact business in Florida.	
Please return all correspondence concerning this matter to the fo	ollowing:
Tracy Peters	
(Name of Person)	
Spartan Solutions	Inc
(Firm/Company)	_
2851 Stage Village C	ove, Suite 22
(Address)	
Bartlett TN 3813 (City/State and Zip of	34
(City/State and Zip o	:ode)
For first and formation are coming this matter places calls	
For further information concerning this matter, please call:	
Trace Palers (an) 2)	13-5255
	Daytime Telephone Number)
,	,
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	Timumussee, Car Sust 1
Enclosed is a check for the following amount:	3

☐ \$78.75 Filing Fee & Certified Copy

27.50 Filing Fee, Certificate of Status &

Certified Copy



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 24, 2009

TRACY PETERS 2851 STAGE VILLAGE COVE, SUITE 22 BARTLETT, TN 38134

SUBJECT: SPARTAN SOLUTIONS INC.

Ref. Number: W09000051740

We have received your document for SPARTAN SOLUTIONS 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 date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collects a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$\$650.00.

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.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6921.

Maryanne Dickey Document Specialist Supervisor

Letter Number: 509A00036471

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT	
BUSINESS IN FLORIDA  9 \( \frac{1}{2} \sigma \)	
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.	
Spartan Solutions, Itc.	
(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. Tennessee 3. 20-2128864	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 4/1/2007 5. perpetual	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. UDDAL GLALIFICATIONS	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 2851 Stage Village Couse Surte 22 Bartlett, TN 3813 (Principal office address)	d
Same	
(Current mailing address)	
8. I.T. Consulting testing, programming & software development (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	باسته
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: USA-RA LIC.	
Office Address: <u>841 Prudential Drive</u> , 12 Aflor	
TackSonville, Florida 32207 (City) (Zip code)	
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.	

- 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		
Chairman:	-8-	<u> </u>
Address:	æ	ECRE
	813	SPAFE.
Vice Chairman:	고	RACO
	ယ္	OF STATE
Address:	<del>- 28</del>	SE SE
Director:		···
Address:		
Director:		
Address:		
B. OFFICERS		
President: <u>Satish</u> <u>Paniel</u>		
Address: 2851 Stage VIIIage cove #22		
Bartlett, TN 38134		
100 dl= 140 1 101'1'		
41 414 Vardon 10-0 #201		
Cordon TN 38014		
- Diame		
Secretary: Take Poters		2/li
Address: 2851 Stage Village cove +22, Bartlett, TW	381	<u>&gt;</u>
Treasurer:	<del></del>	
Address:	<del></del>	
AVATOR 16		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or dire	ctors.	
13. (Signature of Director or Officer listed in number 12 of the application)		
14. Tracy leters Bocretary (Typed or printed name and capacity of person signing application)		- <del></del>



# STATE OF TENNESSEE Tre Hargett, Secretary of State

**Division of Business Services** 312 Rosa L. Parks Avenue 6th Floor, William R. Snodgrass Tower Nashville, TN 37243

SPARTAN SOLUTIONS, INC

ATTN: TRACY PETERS 2851 STAGE VILLAGE CV

STE 22

Bartlett, TN 38134 USA

Request Type: Certificate of Existence/Authorization

Request #:

0004156

December 8 2009

Issuance Date: 12/08/2009

Copies Requested:

**Document Receipt** 

Receipt #: 27358

Filing Fee:

\$20.00

Payment-Check/MO - SPARTAN SOLUTIONS, INC, Bartlett, TN

\$20.00

Regarding:

SPARTAN SOLUTIONS, INC.

Filing Type:

Corporation For-Profit - Domestic

Charter/Qualification Date: 01/14/2005

Status:

Active

Duration Term: Perpetual

Control #:

485260

Date Formed:

01/14/2005

Jurisdiction:

Shelby County

Inactive Date:

### CERTIFICATE OF EXISTENCE

- I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that SPARTAN SOLUTIONS, INC.
- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State which affect the existence/authorization of the business:
- \* has filed the most recent corporation annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination.

Tre Hargett, Secretary of State **Business Services Division**