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TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: CYBER PERSONNEL, 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:

DENNIS ROJAS ARCE
(Name of Person)

CYBER PERSONNEL, INC.
(Firm/Company)

2780 EAST FOWLER AVENUE # 402
(Address)

TAMPA, FLORIDA 33612
(City/State/Zip)

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

DENNIS ROJAS ARCE at (813) 949-9624
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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

FILED
00 OCT 16 PM 3:31
TALLAHASSEE, FLORIDA

**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. CYBER PERSONNEL, INC.
(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 a natural person or partnership if not so contained in the name at present.)
2. STATE OF DELAWARE
(State or country under the law of which it is incorporated)
3. APPLYING FOR
(FEI number, if applicable)
4. SEPTEMBER 25, 2000
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 2780 EAST FOWLER AVENUE #402 TAMPA, FLORIDA 33612
(Principal office address)
b. 2780 EAST FOWLER AVENUE #402 TAMPA, FLORIDA 33612
(Current mailing address)
8. COMPUTER SOFTWARE RECRUITMENT REPRESENTATIVE
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: DENNIS ROJAS ARCE
Office Address: 17614 SHADYSIDE CIRCLE
LUTZ, Florida 33549
(Zip code)

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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.

Dennis Rojas Arce
(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

Chairman: ANIL VERMA

Address: 7652 SAWMILL ROAD #237
DUBLIN, OHIO 43016

Vice Chairman: DENNIS ROJAS ARCE

Address: 17614 SHADYSIDE CIRCLE
LUTZ, FLORIDA 33549

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: ANIL VERMA

Address: 7652 SAWMILL ROAD #237
DUBLIN, OHIO 43016

Vice President: DENNIS ROJAS ARCE

Address: 17614 SHADYSIDE CIRCLE
LUTZ, FLORIDA 33549

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Dennis Rojas Arce
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. DENNIS ROJAS ARCE VICE CHAIRMAN
(Typed or printed name and capacity of person signing application)

State of Delaware
Office of the Secretary of State

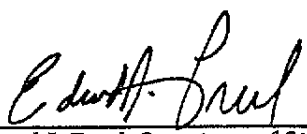
I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CYBER PERSONNEL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF OCTOBER, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CYBER PERSONNEL, INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2000.





Edward J. Freel, Secretary of State

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AUTHENTICATION: 0715528

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DATE: 10-04-00