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RAJESWARI KOTA, CPA PC

85 RARITAN AVENUE, SUITE # 200 HIGHLAND PARK, NJ 08904

Rajeswari Kota, CPA

Tel: (732)-729-0700 Fax: (732)-729-0900

October 27, 2005

Registration Section Division of Corporations P.O.Box 6327 TALLAHASSEE, FL 32314

RE: MUTEX SYSTEMS INC-Application by Foreign Corporation for Authorization to transact business in Florida

Dear Sir:

I am the accountant for the abovementioned client. We are enclosing duty filled in application along with original good standing certificate from the home state and a check for \$ 78.75 towards the filing fees. Please do the appropriate filing and mail the filed papers back to our office address shown on this letterhead.

Please call me if you need any further information.

Thanking you.

Yours truly,

RAJESWARI KOTA

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. MUTEX SYSTEMS INC.		
(Enter name of corporation; must include "INCORPOR" Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	RATED," "COMPANY," "CORPORATION,"	- .
(If name unevailable in Florida, enter alternate comparate	te name adopted for the purpose of transacting business in Florida	
·		1)
2. NEW JERSEY	_{3.} 22-3692985	
(State or country under the law of which it is incorporate	B	
4. November 29, 1999.	5. Per Corp. will cease to exist of the perpetual.	
(Date of incorporation))
6. N/A	40 A24	_ ~
	usiness in Florida, if prior to registration)	
·	& 607.1502, F.S., to determine penalty liability)	M
7. 50 Craigwood Road, Suite 224, So		_ 0
(Principal off	ince address)	
50 Craigwood Road, Suite 224,	South Flairilleid NJ 07000.	-
(Current mail	ling address)	
8. Computer Consulting		
<u> </u>	ate or country to be carried out in state of Florida)	
Name and <u>street address</u> of Florida registered agen	nt: (P.O. Box <u>NOT</u> acceptable)	
Name: REGISTERED AGENT S	SOLUTIONS, INC.	
Office Address: 1333N.DUVAL STREET	<u> </u>	
TALLAHASSEE	Florida 32303.	
(City)	, Florida 32303. (Zip code)	
10. Registered agent's acceptance:		
	pt service of process for the above stated corporation at th	e place
designated in this application, I hereby accept the ap	ppointment as registered agent and agree to act in this cap	acity. I
further agree to comply with the provisions of all sta and I am familiar with and accept the obligations of	atutes relative to the proper and complete performance of the property of the	my duties,
and I am jamutar with and accept the opingations of	my postavii us regisiereu ugeni.	
A DUNG A		
(Registered agent's sig	gnature) 1	-

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: Jyothi Tummala	
Address: 110 Tived Lane East	
Edison, NJ 08837.	
Vice Chairman: Veena Matta	
Address: 12 Eldorado Way	
Monroe Twp, NJ 08831	
Director: Jyothi Tummala	
Address: 110 Tived Lane East	
Edison, NJ 08837.	
Director: Veena Matta	7 g 28
Address: 12 Eldorado Way	ECR. S.
Monroe Twp, NJ 08831	ARI TAR
B. OFFICERS	
President: Jyothi Tummala	
Address: 110 Tived Lane East	<u>Б</u> т 88
Edison, NJ 08837.	
Vice President: Veena Matta	
Address: 12 Eldorado Way	
Monroe Twp, NJ 08831	
Secretary:	
Address:	
Treasurer:	· · · · · · · · · · · · · · · · · · ·
Address:	· · · · · · · · · · · · · · · · · · ·
NOTE: If necessary, you may attach an addendum to the application listing additional of	
13. X Typ Ti Tuwwela (Signature of Director or Officer listed in number 12 of the application)	ion)
Jyothi Tummala, President	ion <i>)</i>

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

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: MUTEX SYSTEMS INC.			
(Name of corporation - must include suffix)			
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Author "Certificate of Existence," and check are submitted to register transact business in Florida.			
Please return all correspondence concerning this matter to the	following:		
RAJESWARI KOTA CPA			
(Name of Person	n)		
RAJESWARI KOTA CPA PC			
(Firm/Company)		
85 RARITAN AVENUE, SUITE # 200			
(Address)			
HIGHLAND PARK, NJ 08904.			
(City/State and Zip code)			
For further information concerning this matter, please call:			
RAJESWARI KOTA at (732) 7	29-0700		
	Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section Division of Corporations	Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314		
Enclosed is a check for the following amount:			
	75 Filing Fee & S87.50 Filing Fee, Gertificate of Status & Certified Copy		



