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Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FOREIGN PROFIT/NONPROFIT CORPORATION

LeverX, Inc.

Certificate of Status	1
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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. LeverX, Inc.
(Name of corporation; must include the word "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. California 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 29, 2003 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Filing
(Date first transacted business in Florida if prior to registration.)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 800 West El Camino Real, Suite 180, Mountain View, CA 94040
(Principal office address)

800 West El Camino Real, Suite 180, Mountain View, CA 94040
(Current mailing address)

8. SAP PLM Consulting
(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 NOT acceptable)

Name: CorpDirect Agents, Inc.

Office Address: 515 East Park Avenue

Tallahassee, Florida, 32301
(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.

Patricia Tadlock
(Registered agent's signature) Patricia Tadlock- Ass't Secretary

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 addresses of officers and/or directors:

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: **Victor Lozinski**
Address: **800 West El Camino Real, Suite 180, Mountain View, CA 94040**

Vice Chairman: **Alan Mendel**
Address: **800 West El Camino Real, Suite 180, Mountain View, CA 94040**

Director: **Larisa Kutsak**
Address: **800 West El Camino Real, Suite 180, Mountain View, CA 94040**

Director:
Address:

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B. OFFICERS

President: **Victor Lozinski**
Address: **800 West El Camino Real, Suite 180, Mountain View, CA 94040**

Vice President: **Alan Mendel**
Address: **800 West El Camino Real, Suite 180, Mountain View, CA 94040**

Secretary:
Address:

Treasurer: **Larisa Kutsak**
Address: **800 West El Camino Real, Suite 180, Mountain View, CA 94040**

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. **Victor Lozinski - President**
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**State of California
Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

LEVERX, INC.

FILE NUMBER: C2433964
FORMATION DATE: 04/29/2003
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
heraby certify:

The records of this office indicate the entity is authorized to exercise
all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of July 09, 2009.

Debra Bowen

DEBRA BOWEN
Secretary of State