

F/000000/904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

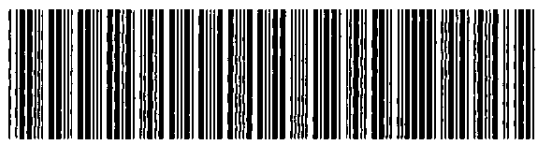
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 APR 21 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W# 0000002238

EP 4/22/10



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2010

P RAJAMANICKAM
1300 VERDE DR. APT 2
NAPLES, FL 34105

SUBJECT: SKYVO CORP.
Ref. Number: W10000002238

RECEIVED
10 APR 21 PM 3:36

We have received your document for SKYVO CORP. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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 or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson
Regulatory Specialist II

Letter Number: 210A00001312

To: Florida Dept of State:
Please see the Certificate
of existence for skyvo corp from
the New York dept of state
attached.
Thank you,

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

(Paramasivam Rajamanickam)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 15, 2010

P RAJAMANICKAM
1300 VERDE DR. APT 2
NAPLES, FL 34105

SUBJECT: SKYVO CORP.
Ref. Number: W10000002238

We have received your document for SKYVO CORP. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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Eula Peterson
Regulatory Specialist II

Letter Number: 210A00001312

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 1300 Verde Dr. Apt 2, Naples, FL 34105

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," or "Certificate of Good Standing" 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:

P RAJAMANICKAM

Name of Person

SKYVO CORP

Firm/Company

1300 Verde Dr. Apt 2

Address

Naples FL 34105

City/State and Zip code

paramraja@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

P RAJAMANICKAM

at (585) 615 9952

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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

**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. SKYVO CORP.
(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. New York 3. 26-2743812
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/04/08 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 1300 Verde Dr, Apt 2, Naples FL 34105
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1300 Verde Dr, Apt 2, Naples FL 34105
(Principal office address)

1300 Verde Dr, Apt 2, Naples, FL 34105
(Current mailing address)

8. Computer programming services
(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: P RAJAMANICKAM

Office Address: 1300 Verde Dr, Apt 2

Naples, Florida 34105
(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.


(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: P RAJAMANICKAM

Address: 1300 Verde Dr, Apt 2, Naples FL 34105

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: P RAJAMANICKAM

Address: 1300 Verde Dr, Apt 2, Naples FL 34105

Vice President: _____

Address: _____

Secretary: Pearlyn Rajamanickam

Address: 1300 Verde Dr, Apt 2, Naples FL 34105

Treasurer: _____

Address: _____

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. P RAJAMANICKAM, President.

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

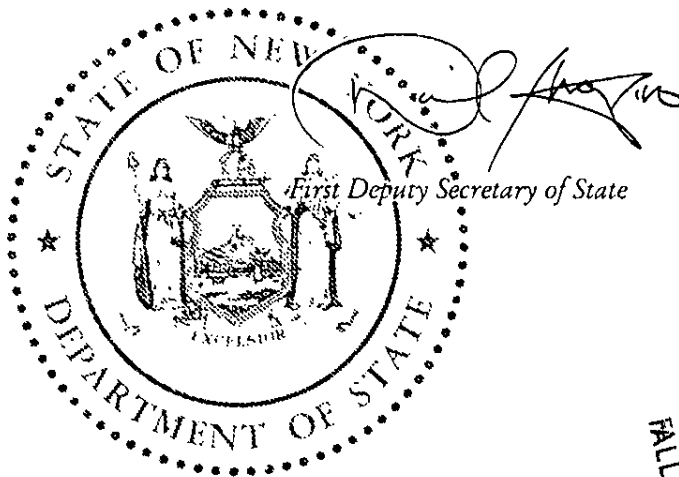
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SKYVO CORP. was filed on 06/04/2008, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 18th day of February two
thousand and ten.*

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SECRETARY OF STATE
FALLAHASSEE, FLORIDA