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TALLAHASSEE FLORIDA

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MRS
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Sensys America, 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," 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:

Carlos Lofstedt

Name of Person

Sensys America, Inc.

Firm/Company

80 SW 8th St 20th Floor

Address

Miami, FL 33130

City/State and Zip code

clofstedt@sensysamerica.com

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

For further information concerning this matter, please call:

MANUEL D. PEREZ

Name of Person

at (305) 609-9549

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. Sensys America, Inc.

(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. Delaware

(State or country under the law of which it is incorporated)

3. 27-1617807

(FEI number, if applicable)

4. 01-07-2010

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 12-1-2010

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

7. 80 SW 8th St. 20Th Floor Miami, FI 33130

(Principal office address)

80 SW 8th St. 20Th Floor Miami, FI 33130

(Current mailing address)

8. Any Lawfull business in Sale and Installation of Traffic Photo Enforcement Systems.

(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: Balwant Cheema, P.A. Balwant Cheema

Office Address: 4160 West 16th Ave. Suite 309

Hialeah

(City)

, Florida 33012

(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.

Balwant Cheema
(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: Carlos Lofstedt

Address: 690 SW 1 Ct. #2328 Miami, FI 33130

Vice Chairman: _____

Address: _____

Director: Carlos Lofstedt

Address: 690 SW 1 Ct. #2328 Miami, FI 33130

Director: _____

Address: _____

B. OFFICERS

President: Carlos Lofstedt

Address: 690 SW 1 Ct. #2328 Miami, FI 33130

Vice President: _____

Address: _____

Secretary: Brian Haskell

Address: 9 Kristee Cir. West Warwick, Rhode Island 02893

Treasurer: Todd Eikinas

Address: 4 Mill River Ln. Hingham, MA 02043

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

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. _____

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

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TALLAHASSEE FLORIDA

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SENSYS AMERICA, 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 SEVENTEENTH DAY OF DECEMBER, A.D. 2010.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8436113

DATE: 12-17-10

You may verify this certificate online
at corp.delaware.gov/authver.shtml