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SECRETARY OF STATE





COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Symphonix Solutions, 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:
Scott Cottrill
Name of Person
Symphonix Solutions, Inc.
Firm/Company
1415 Coventry Road
Address
Charlotte, NC 28211
City/State and Zip code
scottrill@symphonixsolutions.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Scott Cottrill at (704) 904-6209
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clofton Building Clofton Executive Center Circle Tallahassee, FL 32301 Enclosed in a check for the following amounts MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount: \$\sumset\$ \sumset \sumset \sumset \text{\$70.00 Filing Fee} \sumset \sumset \sumset \sumset \text{\$78.75 Filing Fee} \text{\$\$Certificate of Status} \sumset \sumset \sumset \text{\$\$Certified Copy} \sumset \sumset \sumset \text{\$\$Certified Copy} \sumset \text{\$\$Certified Copy} \text{\$\$Certified Copy} \text{\$\$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.

(If name unavai	able in Florida, enter alternate corporate nan	me adopted for the purpose of transacting business in Florida)
North Carolli	18	_{3.} 27-1095747
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
. 10/13/2009		5. perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
. <u>n/a</u>		
:		s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
1415 Cove	ntry Road, Charlotte, NC 282	211
:	(Principal office as	ddress)
1415 Cove	entry Road, Charlotte, NC 2	28211
	(Current mailing as	address)
marketing	service provider,	country to be carried out in state of Florida)
(Purpose() of corporation authorized in home state or	country to be carried out in state of Florida)
. Name and stree	et address of Florida registered agent: (P	O Roy NOT accentable)
Name:	Rob Finkelstein	December 1
Name:	IVOD I IIIKeistelli	—— ORIGINA
~~	9825 Marina Blvd. Ste 100F	
thice Address:	Boca Raton	Florida 33428
thee Address:	P 4 4 6 1 1 1 1 1 4 1 1 1	
ffice Address:	(City)	(Zip code)
	(City)	
). Registered a	(City) gent's acceptance:	(Zip code)
). Registered a aving been nam	(City) gent's acceptance: ed as registered agent and to accept ser	(Zip code) vice of process for the above stated corporation at the place
). Registered a aving been nam signated in this orther agree to c	(City) gent's acceptance: ed as registered agent and to accept ser application, I hereby accept the appoin omply with the provisions of all statutes	(Zip code) vice of process for the above stated corporation at the place stment as registered agent and agree to act in this capacity. It relative to the proper and complete performance of my duti
). Registered a aving been nam esignated in this orther agree to c	(City) gent's acceptance: ed as registered agent and to accept ser application, I hereby accept the appoin	(Zip code) vice of process for the above stated corporation at the place stment as registered agent and agree to act in this capacity. It relative to the proper and complete performance of my duti
). Registered a aving been nam esignated in this orther agree to c	(City) gent's acceptance: ed as registered agent and to accept ser application, I hereby accept the appoin omply with the provisions of all statutes	(Zip code) vice of process for the above stated corporation at the place stment as registered agent and agree to act in this capacity. It relative to the proper and complete performance of my duti
aving been namesignated in this orther agree to c	(City) gent's acceptance: ed as registered agent and to accept ser application, I hereby accept the appoin omply with the provisions of all statutes	(Zip code) vice of process for the above stated corporation at the place stment as registered agent and agree to act in this capacity. It relative to the proper and complete performance of my duti

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: __ Director: ___ Address: Director: Address: _____ B. OFFICERS President: Scott Cottrill Address: 1415 Coventry Road Charlotte, NC 28211 Vice President: Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Inex dort 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.

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

14. ____Scott M. COTTRILL



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

SYMPHONIX SOLUTIONS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 13th day of October, 2009, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

SECRETARY OF STATE TALLAHASSEE FI CORON

1 MAR 24 PM 2: 12



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 10th day of March, 2011.

Elaine & Marshall

Secretary of State