# F11000001457

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
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SECRETARY OF STATE
ALLAHASSEE FI DENT

MRD 4/5

### **COVER LETTER**

TO N PH C :			
TO: New Filing Section Division of Corporations			
SUBJECT: Arivum Business So	utions, Inc.		
	poration - must in	clude suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corpor "Certificate of Existence," or "Certificate of G above referenced foreign corporation to transa	ood Standing" and	check are submi	
Please return all correspondence concerning th	is matter to the foll	lowing:	
c/o Jonathan Feuerman, Esq.			
	lame of Person		
Therrel Baisden, P.A.			
F	irm/Company		_
One SE Third Avenue, Suite	2950		
	Address		_
Miami, FL 33131			
Cit	y/State and Zip coo	le	
jfeuerman@therrelbasiden.com			
E-mail address: (to	be used for future a	annual report not	tification)
For further information concerning this matter	please call:		
Jonthan Feuerman, Esq. at (	305 \ 371-	5758	
Name of Person	Area Code & Da	<del> </del>	e Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADI New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations
Enclosed is a check for the following amount:			
\$70.00 Filing Fee S78.75 Filing Fee Certificate of Sta	& \$78.75 F cus Certified	iling Fee & I Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2011

JONATHAN FEUERMAN, ESQ. THERREL BAISDEN, P.A. ONE SE THIRD AVENUE, SUITE 2950 MIAMI, FL 33131

SUBJECT: ARIVUM BUSINESS SOLUTIONS, INC.

Ref. Number: W11000017685

We have received your document for ARIVUM BUSINESS SOLUTIONS, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist II

Letter Number: 611A00007566

## 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.

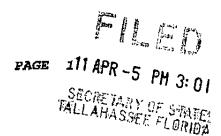
1. Arivum Busir	ness Solutions, Inc.			_
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED	," "COMPANY," "CORPORATION,"	-
ше., со., с	огр, пис, со, от согр. )			
				_
(If name unavai	lable in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in Florida	)
2. Delaware		_ 3.	27-4817909	<del></del>
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)	
4. December		5.	Perpetual	_
(Dat	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
6	(D. 0			_
			in Florida, if prior to registration) 502, F.S., to determine penalty liability)	
<sub>7.</sub> 3411 Silve	rside Road Rodney Building			<del></del>
	(Principal office		•	
c/o Jonathan			E Third Avenue, Suite 2950, Miami, FL 33131	<u> </u>
	(Current mailing	ado	lress)	
。Outsourcii	ng/Consulting			
	s) of corporation authorized in home state of	or ¢	ountry to be carried out in state of Florida)	_
9. Name and stre	et address of Florida registered agent: (	(P.0	D. Box NOT acceptable)	
Name:	Jonathan Feuerman, Esq.			PB -5 PH 3: 01
Office Address:	One SE Third Avenue, Suite	2	950 SET O	7
	Miami		, Florida 33131 (Zip code)	ا بن
	(City)		(Zip code)	01
10. Registered a	gent's acceptance:		Tue!	
			ice of process for the above stated corporation at the ment as registered agent and agree to act in this capa	
further agree to o	comply with the provisions of all statut	es i	elative to the proper and complete performance of m	icny. 1 1y duties,
and I am familia	r with and accept the obligations of my	po	osition as registered agent.	
_	(Registered agent's signati	ure)	,	

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.

	<del></del>
<ol> <li>Names and business addresses of officers and/or direct</li> </ol>	ctors:
A. DIRECTORS	
Chairman: Santiago Levy	11 APR -5 PH 3: 01
Address: 18851 NE 29th Avenue, Suite 700	FALVING MAY OF ALL
Miami, FL 33180	THE PARTY OF PERSONS AND A STATE OF THE PARTY OF THE PART
/ice Chairman:	
Address:	
Director: Jasmine Dhingra	
ddress: 18851 NE 29th Avenue, Suite 70	00
Miami, FL 33180	
irector: Alfredo Riviere	
ddress: 18851 NE 29th Avenue, Suite	700
Miami, FL 33180	
. OFFICERS	
resident:	
ddress:	
ice President:	
ddress:	
ecretary:	
ddress:	
easurer:	
ddress:	
OTE: If necessary, you may attach an addendum to the	a / / · · · · · · · · · · · · · · · · ·
	application using additional officers and/or directors.
he officer or director signing this document (and who is I the true and that he or she is aware that false information s	isector or Officer isted in number 12 above) affirms that the facts stated herein ubmitted in a document to the Department of State constitutes a
nird degree felony as provided for in s.817.155, F.S.	
Santiago Levy, as Director  (Typed or printed name and capaci	ity of person signing application)

# Delaware



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ARIVUM BUSINESS SOLUTIONS, 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 FOURTH DAY OF APRIL,
A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARIVUM BUSINESS SOLUTIONS, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO BEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

4915120 8300

110376579

DATE: 04-04-11

ICATION: 8669577

AUTRENT

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