F11000001612

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



300196672593

03/07/11--01063--006 **78.75

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WII-13281



Wellington FL. 33414

Fax: 561.420.0202

E mail: info@flowmeasure.com Web: www.flowmeasure.com

Division of Corporation PO Box 6327 Tallahassee, FL 32314

4/12/2011

REF: 611A0005714

Dear Ms. McKnight,

Following our conversation with one of the division's customer service representative, we request that the name FlowMeasure Corp., be listed as requested for the following reasons:

FlowMeasure LLC was registered by the same owner (ELA Group LLC), and will be "delisted", as we did not renew the registration. As I recall, such delisting usually occurs in November, and we don't mind waiting.

We attach the certificate of status from Delaware as requested, and will appreciate it if you add it to our file.

Thank you for your ooogeration

Gllead Bordolev

CEO

COVER LETTER

| TO: New Filing Section | |
|--|---|
| Division of Corporations | |
| SUBJECT: FLOWMEASURE CORP. | |
| 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: | |
| GILEAD BORDOLEY | |
| Name of Person | |
| FLOWMEASURE CORP. | |
| Firm/Company | |
| 9648 PHIPPS LANE | |
| Address | |
| WELLINGTON, FL 33414 | |
| City/State and Zip code | |
| E-mail address: (to be used for future annual report notification) | n |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| GILEAD BORDOLEY at (561) 249 3205 | |
| 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, Certified Copy | |



RECEIVED

11 APR 14 PH 12: 39

FLORIDA DEPARTMENT OF STATE CHENANY OF STATE LAHASSEE. FLORIDA Division of Corporations

March 9, 2011

GILEAD BORDOLEY 9648 PHIPPS LANE WELLINGTON, FL 33414

SUBJECT: FLOWMEASURE CORP.

Ref. Number: W11000013281

We have received your document for FLOWMEASURE CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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 further questions concerning your document, please call (850) 245-6931.

Becky McKnight
Regulatory Specialist II Supervisor
New Filing Section

Letter Number: 611A00005714

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. FLOWMEA | | | |
|---|---|---|---------------------|
| | corporation; must include "INCORPORATED forp," "Inc," "Co," or "Corp.") |)," "COMPANY," "CORPORATION," | |
| ,, | o.p,, co, s. co.p. / | | |
| | | | |
| (If name unavail | able in Florida, enter alternate corporate nam | e adopted for the purpose of transacting business in Flo | orida) |
| 2. DELAWAR | | 27-2182724 | |
| (State or country | under the law of which it is incorporated) | (FEI number, if applicable) | |
| 4. 3/9/2010 | | PERPETUAL | |
| (Date | of incorporation) | (Duration: Year corp. will cease to exist or "perpet | ual") |
| 6. <u>3/1/2011 </u> | | | |
| | | in Florida, if prior to registration) 1502, F.S., to determine penalty liability) | |
| - 9648 PHIP | PS LANE, WELLINGTON FL | | |
| 7. <u>9040 141 111 </u> | (Principal office ad | | |
| 9648 PH | IPPS LANE , WELLING | STON FL 33414 | |
| | (Current mailing ad | | |
| | | | 11 SE |
| ·· | CTURING AND DISTRIBUTION | ONS OF FLOW METERS | APR SION SION |
| (Purpose(s | s) of corporation authorized in home state or o | country to be carried out in state of Florida) | - FX |
| 9. Name and stree | et address of Florida registered agent: (P. | O. Box NOT acceptable) | PK CRPC |
| Name: | GILEAD BORDOLEY | | |
| Office Address: | 9648 PHIPPS LANE | | 1:27 |
| | WELLINGTON | , Florida 33414 | |
| | (City) | , Florida (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.

| A. DIRECTORS | | |
|--|---------------------------------------|----------------|
| Chairman: GILEAD BORDOLEY | | |
| Address: 9648 PHIPPS LANE WELLINGTON, FL 33414 | | |
| | | |
| Vice Chairman: | <u>.</u> | |
| Address: | | |
| | | |
| Director: YECHIAL WEINSTEIN | | |
| Address: 30 HASNONIT STREET | | |
| ATZMON, SEGEV, ISRAEL | | |
| Director: DAVID ELAMALEH | | |
| Address: 38 HARTMAN RD, NEWTON, MA. 02459 | | |
| | | |
| B. OFFICERS | | <u> </u> |
| President: GILEAD BORDOLEY | = = = = = = = = = = = = = = = = = = = | SEORE 38038 |
| Address: 9648 PHIPPS LANE, WELLINGTON FL 33414 | APR I | 北京 |
| | d t | RY 0 |
| Vice President: | -:- -:- | S 7 |
| Address: | 27 | TÜK |
| | | |
| Secretary: GILEAD BORDOLEY | | |
| Address: 9648 PHIPPS LANE, WELLINGTON, FL 33414 | | |
| Treasurer: | | |
| Address: | | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or dire | ectors. | |
| 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 are true and that he or she is aware that false information submitted in a document to the Department of Stahlind degree felony as provided for in s.817.155, F.S. | | |
| 4 GILEAD BORDOLEY CEO AND CHAIRMAN OF THE BOARD | | |

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

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FLOWMEASURE CORP." 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 FIFTH DAY OF APRIL, A.D.

2011.

SECRETARY OF STATE
SIVISION OF CORPORATIONS

4797220 8300

110317645

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 8673113

DATE: 04-05-11

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