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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

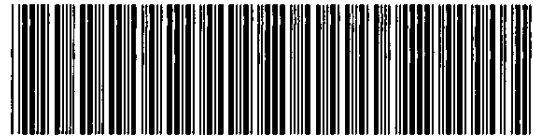
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 4/21/11

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** DIVINE WELLNESS USA 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," 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:

SANJAY GUPTA

(Name of Person)

SANJAY GUPTA & ASSOCIATES, LLC

(Firm/Company)

13792 N GARDEN COVE CIR.

(Address)

DAVIE, FL 33325

(City/State and Zip code)

For further information concerning this matter, please call:

SANJAY GUPTA at ( 954 ) 461-4003  
(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

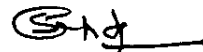
Enclosed is a check for the following amount:

- ☐ \$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

DIVINE WELLNESS USA INC

8. PURPOSE (S) OF CORPORATION AUTHORIZED IN HOME STATE OR  
COUNTRY TO BE CARRIED OUT IN STATE OF FLORIDA

To design, develop, maintain, support, acquire, give on lease or transfer Web Portals and to provide web enabled services and end-to-end web solutions for various usages including medical, health care & well-being, education, trade, industry, e-commerce etc.

A handwritten signature in black ink, appearing to be "S. J." followed by a horizontal line.

**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. **DIVINE WELLNESS USA 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. **INDIA**

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

3. \_\_\_\_\_

(FEI number, if applicable)

4. **MARCH 14TH, 2000**

(Date of incorporation)

5. **PERPETUAL**

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

6. **NO TRANSACTION YET**

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

7. **13792 N GARDEN COVE CIR., DAVIE FL 33325**

(Principal office address)

**13792 N GARDEN COVE CIR., DAVIE FL 33325**

(Current mailing address)

8. **See Purpose of corporation attached.**

(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: **SANJAY GUPTA & ASSOCIATES, LLC**

Office Address: **13792 N GARDEN COVE CIR.**

**DAVIE**, Florida **33325**  
(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)

**04/19/2011**

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. — **ATTACHED**

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: GEORGE VITHAYATHIL

Address: 11667 SW 153 CT

MIAMI, FL 33196

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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. George Vithayathil, President

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

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TALLAHASSEE, FLORIDA



Phone No.0512-2550688  
No.0512-2540383  
Fax No.0512-2540423

**GOVERNMENT OF INDIA,  
MINISTRY OF CORPORATE AFFAIRS,  
O/o REGISTRAR OF COMPANIES, UP & UTTARAKHAND,  
10/499-B, Allenganj,  
KANPUR- 208002.**

**TO WHOMSOEVER IT MAY CONCERN**

This is to certify that M/s. Divine Wellness Private Limited having its registered office at D-3/A, Panki Industrial Estate, Kanpur-208022. is duly incorporated under the Companies Act, 1956 and is registered with this office under company Identification No. U72200UP2000PTC025199.

Place : Kanpur.  
Dated : 13.04.2011

(Sanjay Bose)  
Asstt. Registrar of Companies,  
Up & Uttarakhand,  
Kanpur

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APR 10 PM 2:39  
OFFICE OF STATE  
SECRETARY  
KANPUR