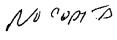
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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T. Burch JUN 6 2011

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: KELVERION, 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:				
JUAN A FIGUEROA				
Name of Person				
JUAN A FIGUEROA, PA, CPA				
Firm/Company				
1428 BRICKELL AVENUE, SUITE 206				
Address				
MIAMI, FLORIDA 33131				
City/State and Zip code				
JUAN@JAFCPA.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
JUAN A FIGUEROA at (305 448-5844				
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 Certified Copy \$87.50 Filing Fee, 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 REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	KELVE	RION,	<u>INC</u>

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

SAME AS ABOVE

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2 DELAWARE

₹ 46-0525131

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

(Date of incorporation)

(FEI number, if applicable)

4. 02/02/2010

PERPETUAL

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

6. 05/01/2011

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

7, 108 WEST 13TH STREET, WILMINGTON, DELAWARE 19801

(Principal office address)

C/O JUAN A FIGUEROA - 1428 BRICKELL AVE STE 206 MIAMI, FL 33131

(Current mailing address)

8 TECHNOLOGY COMPANY

(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:

JUAN A FIGUEROA, PA, CPA

Office Address:

1428 BRICKELL AVENUE STE 206

MIAMI

Florida 3313

(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)

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	Sta S
Chairman:	
Address:	
	ည်း မြောင်း
Vice Chairman:	10 mg
Address:	
	s
Director: DENIS MURPHY	
Address: WEAVERS COURT BUSINESS PARK LINFIELD ROAD	
BELFAST, UNITED KINGDOM BT125GH	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	r directors.
13. X Yaylu - DIRECTOR	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the fare true and that he or she is aware that false information submitted in a document to the Department of third degree felony as provided for in s.817.155, F.S.	facts stated herein of State constitutes a
14. DENIS MURPHY	
(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 "KELVERION 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 TWENTY-THIRD DAY OF MAY,

A.D. 2011.

2011 JUN -3 PM 4: 48

4784467 8300

110596239

AUTHENTICATION: 8779726

DATE: 05-23-11

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