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(Re	equestor's Name)					
(Address)						
(Ad	dress)					
(Cit	y/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



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## **COVER LETTER**

TO:	New Filing Division of	Section Corporations				
SUBJ	ECT: NO	VATIME	<b>TECHNOL</b>	OGY INC	) <i>.</i>	
0000		· <del>_</del> · · · ·	Name of corpora			
Dear S	ir or Madam	:				
"Certif	ficate of Exis	tence," or "Ce		Standing" and	d check are submi	Business in Florida," itted to register the
Please	return all co	rrespondence o	concerning this ma	atter to the fol	llowing:	
Eric :	Su					
			Name	e of Person		
NO\	VATIME	TECHNO	DLOGY INC			
			Firm/	Company		
144	0 BRIDO	SEGATE	DR STE 30	00		
			A	Address		
DIAN	MOND, E	BAR CA 9	1765			
			City/Sta	ate and Zip co	de	
ERIC	SU@NC	OVATIME.N				
		E-mail	address: (to be us	sed for future	annual report not	tification)
For fur	ther informa	tion concernin	g this matter, plea	ase call:		
LIVIA	A GERAF	RDO	at ( 909	9 , 895-	-8100 EXT 1	29
	Name of P	erson			Daytime Telephon	ne Number
	New Filing	COURIER AI Section Corporations	ODRESS:		MAILING AD New Filing Sect Division of Corp	ion
	Clifton Bui				P.O. Box 6327	ροιατίστις
		utive Center C e, FL 32301	ircle		Tallahassee, FL	32314
Enclose	ed is a check	for the follow	ring amount:			
<b>□</b> \$7	70.00 Filing	Fee	75 Filing Fee & ificate of Status		Filing Fee & ed Copy	\$87.50 Filing Fee, Certificate of Status &

## 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.

	able in Florida, enter alternate corporate na			s in Florida)	
2. CALIFORNIA (State or country under the law of which it is incorporated) 3. 95-476					
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)		
4	10/20/1999	PERPE			
(Date	e of incorporation)	(Duration:	Year corp. will cease to exist or "	perpetual")	
6. <u>N/A</u>					
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60		•		
<sub>7.</sub> 1440 BRID	GEGATE DR STE 300 DIAM	OND BA	R, CA 91765		
	(Principal office				
SAME AS	ABOVE				
<u></u>	(Current mailing	dress)	<u> </u>		
<sub>s.</sub> Provide ar	nd implement workforce ma	agemen	t solutions	NISION OF CO	
* '	s) of corporation authorized in home state of		<del></del>	13 PR	
9. Name and stree	et address of Florida registered agent: (	O. Box NO	Tacceptable)	CORPORATIONS 3 AM 11: 46	
Name:	Incorp Services, Inc.				
Office Address:	17888 67th Court North			<b>6</b> 55	
	Loxahatchee	. Flor	<sub>rida</sub> 33470		
	(City)	,,,,,,,	(Zip code)	•	
	· • • • • • • • • • • • • • • • • • • •				

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.

(Registered agent's signature)

Incorp Services, Inc.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Frank Su Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 Vice Chairman: Andy Su Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 Director: Douglas Hsieh Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 Director: Eric Su Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 **B. OFFICERS** President: Frank Su Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 Vice President: Frank Su Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 Secretary: Frank Su Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 Treasurer: Frank Su Address: 1440 Bridgegate Dr Ste 300 Diamond Bar CA 91765 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer of 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. Eric Su / Director, Sperations

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

## State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

NOVATIME TECHNOLOGY INC.

FILE NUMBER:

C2149149

FORMATION DATE:

10/20/1999

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 01, 2011.

> **DEBRA BOWEN Secretary of State**