Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000280447 3)))



H110002804473ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

: CORPORATION SERVICE COMPANY Account Name

Account Number : I2000000195 Phone : (850)521-1000 : (850)558-1515 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address		

FOREIGN PROFIT/NONPROFIT CORPORATION JAIN IRRIGATION, INC.

Certificate of Status	0.
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

11/29/2011

11/29/2011 4:09:12 PM PAGE

2/004

Fax Server
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 NOV 29 PM 1: 36

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.

	corporation; must include "INCORPORAT	FED," "COMPANY," "CORPORATION,"
")na.," "Ca.," "C	Corp," "Inc." "Co," or "Corp.")	
(If name unavai	lable in Florida, enter alternate corporate n	name adopted for the purpose of transacting business in Florida)
2. California		3. 20-8338462
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4. 7/18/1960		5. perpetual
(Dai	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)
7 1941 S. Vine	yard Ave., Unit 6, Ontario, CA 917	761
<i>I</i>	(Principal office	
1941 S. Vine	yard Ave., Unit 6, Ontario, CA 917	761
	(Current mailin	
	uipment Manufacturer	
(Purpose	(s) of corporation authorized in home state	e or country to be carried out in state of Florida)
9. Name and str	eet address of Florida registered agent:	(P.O. Box NOT acceptable)
Name:	Corporation Service Company	
Office Address:	1201 Hays Street	
	Tallahassee	, Florida 32301 (Zip code)
	(City)	(Zip code)
Having been na designated in the further agree to	is application, I hereby accept the app comply with the provisions of all statt ar with and accept the obligations of n	service of process for the above stated corporation at the place pointment as registered agent and agree to act in this capacity. I utes relative to the proper and complete performance of my dutte my position as registered agent.
	Corporation Service Company	
	By: Beeky Peirce	Becky Peirce Assistant Vice President
	(Registered agent's sign	ature)

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.

Fax Server

11/29/2011 4:09:12 PM PAGE

3/004

04 Fax Server FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

11 NOV 29 PM 1: 36

12. Names and dusiness addresses of officers and/or directors:
A. DIRECTORS
Chairman: Anil B. Jain
Address: 1819 Walcutt Rd., Suite 1, Columbus, OH 43228
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
A ria Olson
Address: 1941 S. Vineyard Ave., Unit 6, Ontario, CA 91761
Address: 1741 S. Vincyata Ave., Olite o, Olitatio, CA 51101
An Cinara
Vice President: Asa Ginoza
Address: 1941 S. Vineyard Avc., Unit 6, Ontario, CA 91761
Secretary: Narinder K. Gupta
Address: 1941 S. Vineyard Ave., Unit 6, Ontario, CA 91761
Treasurer: Narinder K. Gupta
Address: 1941 S. Vineyard Ave., Unit 6, Ontario, CA 91761
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
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 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 follows as provided for in s.817.155, F.S.
14. NALWOGZ (C. G.SPTA, Secretary (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

State of California Secretary of State

11 NOV 29 PM 1: 36

CERTIFICATE OF STATUS

ENTITY NAME:

JAIN IRRIGATION, INC.

FILE NUMBER:

C0399713

FORMATION DATE:

07/18/1960

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 November 22, 2011.

DEBRA BOWEN
Secretary of State

A OSP 06 99791 PAM