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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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FOREIGN PROFIT/NONPROFIT CORPORATION  
Laurels Technologies Inc.

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

# 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. Laurels Technologies 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. WY

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

3.

(FBI number, if applicable)

4. 09/05/2012

(Date of incorporation)

5. perpetual

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

6.

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

7. 20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

(Principal office address)

20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

(Current mailing address)

8. Providing IT solutions to different clients.

(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: United States Corporation Agents, Inc.

Office Address: 13302 Winding Oaks Blvd., Suite A

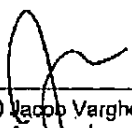
Tampa, Florida 33688

(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)  Jacob Varghese, VP, on behalf of United States Corporation  
Agents, Inc.

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:

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: Raju Mamidala

Address: 20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

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

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

Director: Raju Mamidala

Address: 20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

Director: Lakshmi Bandi

Address: 20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

**B. OFFICERS**

President: Raju Mamidala

Address: 20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

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

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

Secretary: Lakshmi Bandi

Address: 20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

Treasurer: Lakshmi Bandi

Address: 20510 Colonial Isle Dr, Apt 205 Tampa, FL 33647

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. MamSV  
(Signature of Director or Officer listed in number 12 of the application)

14. Raju Mamidala, President  
(Typed or printed name and capacity of person signing application)

12 SEP 27 AM 10:22  
STATE  
CALIFORNIA  
PASSPORT

**STATE OF WYOMING**  
**Office of the Secretary of State**

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby  
certify that according to the records of this office,

**Laurels Technologies Inc.**

is a

**Profit Corporation**

formed or qualified under the laws of Wyoming dtd on September 5, 2012, comply with all  
applicable requirements of this office. Its period of duration is Perpetual. This entity has been  
assigned entity identification number 2012-000628757.

This entity is in existence and in good standing in this office and has filed all annual reports  
and paid all annual license taxes to date, or is not yet required to file such annual reports; and has  
not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed,  
authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming  
on this 26th day of September, 2012 at 9:54 AM. This certificate is assigned 012667321.



*Max Maxfield*  
Secretary of State

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TALLAHASSEE, FLORIDA

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and  
effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the  
Secretary of State's website <http://wyobiz.wy.gov> and following the instructions displayed under Validate Certificate.