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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

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COVER LETTER

TO: **New Filing Section** Division of Corporations SOFTNET TECHNOLOGY SOLUTIONS 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: **ALVIN SCOTT** Name of Person **ACQUITY STAFFING SOLUTIONS** Firm/Company 75 N WOODWARD AVE # 82731 Address TALLAHASSEE, FL 32313 City/State and Zip code alvin@acquitystaffing.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (904) 567-5288

Area Code & Daytime Telephone Number **ALVIN SCOTT** Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL. 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: ☐ \$78.75 Filing Fee & \$87.50 Filing Fee. □ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status & Certificate of Status Certified Copy

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 TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. SOFTNET TECHNOLOGY SOLUTIONS, 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) (State or country under the law of which it is incorporated) (FEI number, if applicable) , Perpetual 05/17/2012 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 07/11/2013 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 200 S VIRGINIA ST, 8TH FLOOR # 821, RENO, NV-89501 (Principal office address) (Current mailing address) **BUSINESS EXPANSION** (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) Business Filings Incorporated Name: 515 E. Park Avenue Office Address: Tallahassee 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, Jany Jo Spalinger, Asst. Sec. For Business Filings Registered (Igent's signature) Incorporated

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	
Chairman:	
Address:	
Vice Chairman:	NAMEN AND AND AND AND AND AND AND AND AND AN
Address:	<u> </u>
Director: MURTHY DVSN	19 L
Address: 200 S VIRGINIA ST, 8TH FLOOR # 821, RENO, NV-89501	F 3 1
	1.08 1.08 1.08 1.08
Director:	TE O
Address:	
B. OFFICERS	
President: MURTHY DVSN	
Address: 200 S VIRGINIA ST, 8TH FLOOR # 821, RENO, NV-89501	
Vice President:	
Address:	-
Secretary:	***************************************
Address:	
Treasurer: RAGINI VECHAM	**************************************
Address: 200 S VIRGINIA ST, 8TH FLOOR # 821, RENO, NV-89501	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or	directors.
Signaturé of Director or Officer	The state of the s
The officer or director signing this document (and who is listed in number 12 above) affirms that the fa are true and that he or she is aware that false information submitted in a document to the Department of a third degree felony as provided for in s.817.155, F.S.	icts stated herein f State constitutes
MURTHY DVSN, Director Lham	

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

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SOFTNET TECHNOLOGY SOLUTIONS**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 17, 2012, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20130703-1127
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 3, 2013.

ROSS MILLER Secretary of State