

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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FON SERVICE COMPANY
ACCOUNT NO. : 12000000195
REFERENCE : 909897 7291449
AUTHORIZATION: Spelle man
COST LIMIT : \$ 70.00
ORDER DATE: December 5, 2013
ORDER TIME : 11:05 AM
ORDER NO. : 909897-005
CUSTOMER NO: 7291449
·
FOREIGN FILINGS
NAME: REGATTA TRAVEL SOLUTIONS INC.
XXXX QUALIFICATION (TYPE: CO)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING
CONTACT DEDGON. Cugio Voight EVEL FOOLS
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:

COVER LETTER

TO: New Filing Section Division of Corporati	ons		
SUBJECT: Regatta	Travel Solutio	ns Inc.	
	Name of corporation	on - must include suffix	
Dear Sir or Madam:			
The enclosed "Application by "Certificate of Existence," or above referenced foreign corp	"Certificate of Good St	anding" and check are sub	
Please return all corresponde	nce concerning this mat	ter to the following:	
Ashwin Kamlani			
	Name o	f Person	
Regatta Travel S	olutions Inc.		
	Firm/Co	ompany	
325 Winding Rive	er Ln., Suite 20	01(b)	
		iress	
Charlottesville, V	irginia 22911		
		and Zip code	
ashwin@regattatra	velsolutions.co	m	
		d for future annual report n	otification)
For further information conce	erning this matter, pleas	e call:	
Ashwin Kamlani	786	、853-0758	
Name of Person	Are	853-0758 a Code & Daytime Telepho	one Number
STREET/COURIE New Filing Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	MAILING APPROVED New Filing Sent Division of Control P.O. Box 6327 Tallahassee, F	ction prporations
Enclosed is a check for the fo	ollowing amount:		
□ \$70.00 Filing Fee □	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & 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.

(Enter name of co	Solutions Inc. proporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"
ис., со., со	orp, me, co, or corp.)	
(If name unavaila	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting business in Florida)
Delaware		80-0678989 3.
	under the law of which it is incorporated)	(FEI number, if applicable)
January 28, 20	11	Perpetual 5.
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
		s in Florida, if prior to registration) .1502, F.S., to determine penalty liability)
- 323 Wilding Ki	(Principal office a	
325 Winding Ri	rmicipal office a) ver Ln, Suite 201(b), Charlottesville, VA	22911
	(Current mailing a	
Any lawful act	or activity for which a corporation may b	e organized.
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)
. Name and stree	et address of Florida registered agent: (P.O. Box NOT acceptable)
Name:	Corporation Service Company	
Office Address:	1201 Hays Street	
	Tallahassee	, Florida 32301
	(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.

Corporation Service Company

Sue G. Knight
Assistant Vice President

(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:

Chairman: Address: 325 Winding River Ln., Suite 201(b) Charlottesville Virginia 22911 Vice Chairman: Address: Director: Address: B. OFFICERS President: Address: 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President: Address: Address:
Address: Charlottesville Virginia 22911 Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS President: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Address: Director: Address: Director: Address: B. OFFICERS President: Address: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Director: Address: Director: Address: B. OFFICERS President: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Director: Address: Director: Address: B. OFFICERS President: 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Address: B. OFFICERS President: Address: 235 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Director: Address: B. OFFICERS President: Ashwin Kamlani Address: Charlottesville, Virginia 22911 Vice President: Vice President:
Director: Address: B. OFFICERS President: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Address: B. OFFICERS President: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911
B. OFFICERS President: Address: Charlottesville, Virginia 22911 Vice President: September 2 201(b) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
President: Address: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
President: Address: Ashwin Kamlani 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Address: 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911 Vice President:
Charlottesville, Virginia 22911 Vice President:
Vice President:
Vice President:
ω
Ashwin Kamlani Secretary:
Address: 325 Winding River Ln., Suite 201(b), Charlottesville, Virginia 22911
Treasurer: Ashwin Kamlani
Address: 325 Winding River Ln., Suite 201(b) Charlottesville, Virginia 22911
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 felony as provided for in s.817.155, F.S.
14. Ashwin Kamlani, Chief Executive Officer (Typed or printed name and capacity of person signing application)

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "REGATTA TRAVEL SOLUTIONS 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 FIFTH DAY OF

DECEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REGATTA"

TRAVEL SOLUTIONS INC. " WAS INCORPORATED ON THE TWENTY-EIGHTH DAY

OF JANUARY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

4933203 8300

131380456

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 0949089

DATE: 12-05-13

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