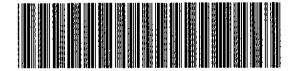
(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



700253927407

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1013-67598



JON SERVICE COMPANY.					
ACCOUNT NO.	. :	12000000	0195		
REFERENCE	Ξ:	911278	7897171		
AUTHORIZATION	J :	Sorell	Reman		
COST LIMIT	c :	\$ 70.00	ROLL)	
ORDER DATE : December 5, 201	.3				
ORDER TIME : 4:56 PM					
ORDER NO. : 911278-005					
CUSTOMER NO: 7897171					
FOREIGN	FILI	<u>NGS</u>			
NAME: KUBRA DATA T	'RANS	FER LTD.			
					
				SECRE ALLAH	general mil
XXXX QUALIFICATION (TYPE:	<u>CO</u>)			HASS ETAB	e. 6. b.
PLEASE RETURN THE FOLLOWING A	מ סס	הרב הדיני הרב הביני	TNC	TARY OF THE	ξ - 1 <u>46</u> 4 2
		OOF OF FIL	JING.		A _{rgust} an
CERTIFIED COPY XX PLAIN STAMPED COPY				RDA RDA	,
CERTIFICATE OF GOOD S	TAND	ING			
			_		
CONTACT PERSON: Susie Knight					
		EXAMINER:			

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: KUBRA Data Transfer Ltd.
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:
Terry Ferrentino
Name of Person
Corporation Service Company
Firm/Company
1201 Hays Street
Tallahassee, FL 32301
City/State and Zip code
Lida.sadrazodi@kubra.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lida Sadrazodi _{at (} 905 ₎ 366-1346
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2013

CORPORATION SERVICE COMPANY

RESUBMIT
Please give original
submission date as file date.

SUBJECT: KUBRA DATA TRANSFER LTD., CO.

Ref. Number: W13000067598

We have received your document for KUBRA DATA TRANSFER LTD., CO. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 313A00028124

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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.

(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting	g business	in Flor	ida)
NY USA		3.	13-3807620			
(State or country	under the law of which it is incorporated)		(FEI number, if appl	icable)		
01/27/1995		5.	Perpetual			
(Date	of incorporation)		(Duration: Year corp. will cease to	exist or "p	erpetu	al")
Has not starte	d yet. Expected date for doing busines	s, c	onditional on contract being awar	ded is 06/	01/201	14
. 210 McGaw Dri	•		n Florida, if prior to registration) 502, F.S., to determine penalty liabili	ry)		
•	. (Principal office	addı	ress)			
5050 Tomken F	Rd. Mississauga, ONT_L4W 5B1					
	(Current mailing	addı	ress)			
Providing data	processing, printing and mailing to be	can	ried in Home state and for Polk C	SE SE STANDO	_ ಟ್ಟ	
(Purpose(s) of corporation authorized in home state or	r co	untry to be carried out in state of Flo.	rida)	<u> </u>	,,,
. Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	SE	0	1 1
Name:	Corporation Service Company				=	3
ffice Address:	1201 Hays Street			70130 31715	7: 52	٠
	Tallahassee		. Florida 32301	100		
	(City)		(Zip code)			

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: A. DIRECTORS Chairman: Vice Chairman: ___ Address: Rick Watkin Director: 5050 Tomken Rd. Mississauga, ONT L4W 5B1 Canada Address: Brian Silva Director: 2961 Sidco Drive, Nashville, TN 37204 USA B. OFFICERS President: Rick Watkin 5050 Tomken Rd. Mississauga, ONT L4W 581 Canada Vice President: Lida Sadrazodi 5050 Tomken Rd. Mississauga, ONT L4W 5B1 Canada Secretary: _ Address: Lida Sadrazodi 5050 Tomken Rd. Mississauga, ONT L4W 5B1 Canada NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. LIDA SADRAZODI _ CFo
(Typed or printed name and capacity of person signing application)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of KUBRA DATA TRANSFER LTD. was filed on 01/27/1995, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 04th day of December two thousand and thirteen.

Anthony Giardina

Dutiny Sicidina

Executive Deputy Secretary of State

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13 DEC 10 AH 7: 52 SECRETARY OF STATE