# FA00000866

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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14 FEB 12 PH 3: 08

SECRETARY OF STATE

W13-70198

### **COVER LETTER**

то:	New Filing Division of	Section Corporations		
SUBJ	ECT:	YERBABUENA SC	SETWARE JUC.	
			ation - must include suffix	
Dear S	Sir or Madam	:		
"Certi	ficate of Exis	lication by Foreign Corporation stence," or "Certificate of Good preign corporation to transact by	Standing" and check are sub	
Please	return all co	rrespondence concerning this n	natter to the following:	
			A UTA ne of Person	
			SERVICES CORP	
		1110 CEDAR	FAUS DEIVE	
	<del></del>	WESTON City/St	TL 33307 ate and Zip code	
	•	E-mail address: (to be v	ised for future annual report r	notification)
For fu	rther informa	tion concerning this matter, ple	ease call:	
	<u>Sawia</u> \ Name of P	JPA at ( 95)	54 ) <u>217-6080</u> Area Code & Daytime Teleph	one Number
	New Filing Division of Clifton Bui 2661 Execu	Corporations	MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclo	sed is a check	for the following amount:		
<b>□</b> \$7	0.00 Filing Fe	ee S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



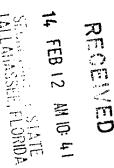
#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 30, 2013

SILVIA VILA 1116 CEDAR FALLS DR WESTON, FL 33327

SUBJECT: YERBABUENA SOFTWARE, INC.

Ref. Number: W13000070198



We have received your document for YERBABUENA SOFTWARE, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 213A00029213

## 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.

	able in Florida, enter alternate co			-		rida)	-
(State or country	LAWARE under the law of which it is incor	rporated)	(FEI nur	nber, if applicable)			-
45(	DL. 01. 2011	5	PE	PPETUAL	*		•
(Date	of incorporation)	(Dura	ion: Year corp.	will cease to exist	or "perpett	ual")	
6		01/2013		·			•
• .	(Date first transact (SEE SECTIONS 607.1	ted business in Florid 1501 & 607.1502, F.S					
	116 CEDAR FAUS I	pal office address)	·				-
8		OFTWARE S			ALL SEC	7	_
(Purpose(s	) of corporation authorized in ho	ome state or country to	be carried out in	state of Florida)	ASE.	83	******
9. Name and stree	t address of Florida registered	d agent: (P.O. Box	NOT acceptab	le)	388	2	y a b skua E yes k re
Name:	Siwia Vila				Fried From	물	
Office Address:	1110 CEDAR FAUS	. Daive			STATE LONIDA	3: 08	
	WESTON (City)	· · · · · · · · · · · · · · · · · · ·	Florida <u>3</u> 3 (Zip c				
10 Registered or	gent's acceptance; ed as registered agent and to			above stated corp int and agree to t		s capa	

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:			
Address:			
Director;			
Address:			
Director:			
Address:			
B. OFFICERS			
President: Antonio de las Nieves			
Address: 8930 NW GTH. CT. PLANTATION, FL 33324	SEC	17	
	7.5 7.5 7.5	<u> </u>	\$ 7100 A
Vice President: JOSE Wis DE LA ROSA	SET OF	2 2	Practice
Address: 8930 NW COTH, CT. PLANTATION FL 33324		မှ	C. mar.
	STATE LONDA	02	
Secretary: ANTONO DE LAS NIEUES		<del> </del>	
Address: 8930 NW GTH CT PLANTATION, FL 33324			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	d/or direct	ors.	
Signature of Director or Officer			
The officer or director signing this document (and who is listed in number 12 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Departme a third degree felony as provided for in s.817.155, F.S.	ie facts sta nt of State	ited he cons	crein titutes
14. ANTONO DE LAS NIEVES - PRESIDENT  (Typed or printed name and capacity of person signing application)			

## Delaware

PAGE 1

## The First State

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

DELAWARE, DO HEREBY CERTIFY "YERBABUENA SOFTWARE 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 TWENTY-FIRST DAY OF

JANUARY, A.D. 2014.

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.

14 FEB 12 PH 3: 08
SECKETARY OF STATE
ALASSET FLORIDA

4965538 8300

140064483

AUTHENT

AUTHENTYCATION: 1072543

DATE: 01-21-14

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