

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140001074273)))



H140001074273ABC

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

RAY -5 PM 4: 04

## FOREIGN PROFIT/NONPROFIT CORPORATION Juvo Mobile Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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Corporate Filing Menu

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14 MAY -5 AM 10: 30

# 14 MAY -5 AM 10: 30

#### **COVER LETTER**

TO: New Filing Section Division of Corporations	
•	
SUBJECT: Juvo Mobile 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:	
Steven Polsky	
Name of Person	-
Juvo Mobile Inc.	
Firm/Company	- "
90 Laurel Grove Avenue	
Address	- ,
Ross, CA 94957	
City/State and Zip code	- :
steve.polsky@gmail.com	•
E-mail address: (to be used for future annual report notification)	- {
For further information concerning this matter, please call:	
Steven Polsky at (415 ) 730-0307	
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 ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy	s &

### 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	rporation; must include "INCORPORA rp," "Inc," "Co," or "Corp.")	TED," "COMPANY," "CORPORATION,"	•
(If name unavaila	ble in Florida, enter alternate corporate	name adopted for the purpose of transacting business in Florida)	,
Delaware		3.	
	inder the law of which it is incorporated	3. (PEl number, if applicable)	
March 25, 2014		5. (Direction: Your corn, will content to evict or "nemetical")	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	•
		_	
		iness in Florida, If prior to registration) 607.1502, F.S., to determine penalty liability)	
90 Laurel Grove /	venue, Ross, CA 94957		VAH 5
<u> </u>	(Principal offic	ce address)	1
90 Laurel Grove	Avenue, Ross, CA 94957		ហ
	(Current mailir	ng address)	2
Mobile products	and services		14 MAY -5 AM 10: 30
(Purpose(s	of corporation authorized in home state	e or country to be carried out in state of Florida)	0
Name and stree	t address of Florida registered agent	t: (P.O. Box NOT acceptable)	
Name:	C T Corporation System		
ffice Address:	1200 South Pine Island Road		
	Plantation	33324	
	(City)	, Florida(Zip code)	
laving been nam esignated in this urther agree to c	application, I hereby accept the appoint the appoint of all states amiliar with and accept the obligation of T Corporation System	t service of process for the above stated corporation at the pointment as registered agent and agree to act in this capa tutes relative to the proper and complete performance of n lons of my position as registered agent.	icity. I
В	<sub>y:</sub> 7	lieble Charinond	
	·		

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: Steven Polsky		_
Address: 90 Laurel Grove Avenue, Ross, CA 94957		
Vice Chairman:		<del>-</del>
Address:		_
Director: Steven Polsky		_
Address: 90 Laurel Grove Avenue, Ross, CA 94957		
Director:		<del></del>
Address:		- DI
B. OFFICERS	K	DIVISION
President:		A PA
Address: 90 Laurel Grove Avenue, Ross, CA 94957		- 27 27 27 37 37 37
	<del>- }</del>	
Vice President:	37	AN OR CALL
Address:	<del></del>	<del>-</del>
Secretary: Sieven Polsky		_
Address: 90 Laurel Grove Avenue, Ross, CA 94957	<del></del>	_
Treasurer:		_
Address:		_
NOTE: If necessary, you may attach an addendam to the application listing additional officers and/or director	rs.	
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 state are true and that he or she is aware that false information submitted in a document to the Department of State of a third degree felony as provided for in s.817.155, F.S.		1
14. Steven Polsky, Chief Executive Officer		_
(Typed or printed name and capacity of person signing application)		

# Delaware

DACP 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "JUVO MOBILE 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 SECOND DAY OF MAY, A.D.
2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5504916 8300

140558297

You may verify this certificate online

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1341911

DATE: 05-02-14