# F14000002961

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
· ·
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

W14-33515



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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 29, 2014

KEVIN TIMIRCHAND 1803 FLORENCE VISTA BLVD. ORLANDO, FL 32818

SUBJECT: VERUM CONSULTING LIMITED INC.

Ref. Number: W14000033515

We have received your document for VERUM CONSULTING LIMITED INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501 or 605.0905, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 605.0904(7), F.S., this office is required to collect a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The document must contain both the street address of the principal office and the mailing address of the entity.

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 the corrected original and one copy of 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.

Thomas Chang Regulatory Specialist II

Letter Number: 314A00011594

### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Verum Consulting Limited Corp 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:	
Keun Timirchand Name of Person	
Verum Consulting Limited Corp.	
1803 FLORENCE VISTA BLVD Address	
ORLANDO FL 32818 City/State and Zip code	
Heun . timirchand Ogmail. com  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\sigma} \$78.75 Filing Fee & \$\Boxed{\sigma} \$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. Verum Consulting Limited Corp. (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) 2. <u>Delaware</u> 3. <u>46-5616670</u>
(State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual") Upon Qualification
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) ORENCE UISTA BLUD OPLANDO FL328 (8 (Principal office address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Keyin Timirchand rame: 1803 FLORENCE UISTA BLUD Office Address: ORLANDO ,Florida 32818 (City) (Zin code) 9. 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. (Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:

A. DIRE	CTORS	
Chairman:	Keuin Timirchand	
Address: _	1803 FLORENCE VISTA BLUD	
_	ORLANDO FL, 32818	
	nan:	
Address: _		
_		
Director: _		
_		
Director: _		
Address: _		
		2-111
B. OFFIC	CERS	
President:		10 E
		:
		(140 <b>)</b>
Vice Presid	ent:	
_		
Secretary:		
Address: _		
Treasurer:		
Address: _		
≅OTE: II	necessary, you may attach an addendum to the application listing additional office	rs and/or directors.
	11241	
The office	Signature of Director or Officet or director signing this document (and who is listed in number 12 above) affirms to that he or she is aware that false information submitted in a document to the Departee felony as provided for in s.817.155, F.S.	
13	(Typed or printed name and capacity of person signing application)	
	(Typed or printed name and canacity 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 "VERUM CONSULTING LIMITED" 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 EIGHTH DAY OF JULY, A.D.

2014.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VERUM CONSULTING LIMITED" WAS INCORPORATED ON THE EIGHTH DAY OF MAY,

A.D. 2014.

14 JUL 10 MI II: 40

5530353 8300

140926287

AUTHENTY CATION: 1514446

DATE: 07-08-14

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