

F14000004126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

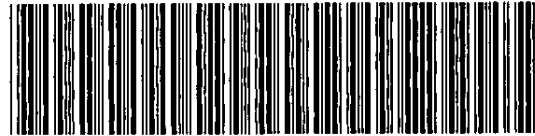
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 OCT -1 PM 4:41
TO ALL REQUESTED
SUFFICIENCY OF FILING

FILED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
14 OCT -1 AM 9:18

MD 10/2



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 321231 4301770

AUTHORIZATION :

[Signature]

COST LIMIT : \$78.75

ORDER DATE : October 1, 2014

ORDER TIME : 3:04 PM

ORDER NO. : 321231-005

CUSTOMER NO: 4301770

FOREIGN FILINGS

NAME: AVENTURE CAPITAL INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Aventure Capital 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:

Kathleen McComb

Name of Person

Patterson Belknap Webb & Tyler LLP

Firm/Company

1133 Avenue of the Americas

Address

New York, NY 10036

City/State and Zip code

krissingh@mac.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen McComb

at (212)

336-2567

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 & 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.

1. Aventure Capital Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Aventure Investment Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 47-1967527
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. September 16, 2014 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 800 S Pointe Drive, Unit #1403, Miami, Florida 33139
(Principal office address)
- 800 S Pointe Drive, Unit #1403, Miami, Florida 33139
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

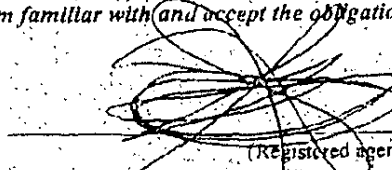
Name: Krishna P. Singh

Office Address: 800 S Pointe Drive, Unit #1403

Miami, Florida 33139
(City) (Zip 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. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Krishna P. Singh

Address: 800 S Pointe Drive, Unit #1403

Miami, Florida 33139

Director: _____

Address: _____

B. OFFICERS

President: Krishna P. Singh

Address: 800 S Pointe Drive, Unit #1403, Miami, Florida 33139

Vice President: _____

Address: _____

Secretary: Krishna P. Singh

Address: 800 S Pointe Drive, Unit #1403, Miami, Florida 33139

Treasurer: Krishna P. Singh

Address: 800 S Pointe Drive, Unit #1403, Miami, Florida 33139

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____
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.

13. Krishna P. Singh, 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 "AVENTURE CAPITAL 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 FIRST DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVENTURE CAPITAL INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF SEPTEMBER, A.D. 2014.


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

5604044 8300

141244755

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1745164

DATE: 10-01-14

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CALIFORNIA SECRETARY OF STATE