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| (City/State/Zip/Phone #) | | | |
| PICK-UP | WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

TO: New Filing Section

Division of Corporations

_{subject:} Venture IT Group 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:

Susan Harding

Name of Person

Harding & Associates Tax Services, Inc.

Firm/Company

113 Pontotoc Plaza

Address

Auburndale, FI 33823

City/State and Zip code

susan.harding@hardingtax.com

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

For further information concerning this matter, please call:

Susan Harding

at (863) 968 1010

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

New Filing Section

P.O. Box 6327

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2014

SUSAN HARDING HARDING & ASSOCIATES TAX SERVICES, INC. 113 PONTOTOC PLAZA AUBURNDALE, FL 33823-

SUBJECT: VENTURE IT GROUP INC.

Ref. Number: W14000072634

We have received your document for VENTURE IT GROUP INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

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.

Maryanne Dickey Regulatory Specialist II

Letter Number: 114A00025680

www.sunbiz.org

Division of Commentions D.O. DOV 6207 Well-bases Florida 2021

HARDING & ASSOCIATES TAX SERVICES, INC.

VACATION HOME & NON-RESIDENT INVESTMENT TAX SPECIALISTS

113 PONTOTOC PLAZA AUBURNDALE, FL 33823-3439 TEL: (863) 968-1010 FAX: (863) 968-1020

e-mail: info@hardingtax.com website: www.hardingtax.com

For the attention of Maryanne Dickey New Filing Section Division of Corporations PO Box 6327 Tallahassee FI 32314

Monday, December 22, 2014

Dear Ms Dickey,

Re Venture IT Group Inc.

Further to your letter of December 5th, please find enclosed:-

Corrected registration form stating EIN and confirming above name Certificate of existince obtain from Government of Newfoundland & Labrador

Please process the application and issue the document number for Venture IT Group Inc.

Thank you for your assistance.

Susan J Harding

Yours sincerel

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.

| Canada 98 - 1/94274 | DEC 29 PH 4: 07 |
|---|-----------------|
| If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busin Canada (State or country under the law of which it is incorporated) (FEI number, if applicable) | 44 |
| Canada State or country under the law of which it is incorporated) State or country under the law of which it is incorporated) (FEI number, if applicable) | |
| (State or country under the law of which it is incorporated) (FEI number, if applicable | |
| | e) |
| 12/19/2012 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist of | |
| | or "perpetual") |
| UPON QUALFICATION | |
| (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) | |
| 26 Cordelia Crescent, Torbay, Newfoundland A1K 1N2 Canada | |
| (Principal office address) | |
| 26 Cordelia Crescent, Torbay, Newfoundland A1K 1N2 Canada | |
| (Current mailing address) | |
| | |
| Name and street address of Florida registered agent: (P.O. Box NOT acceptable) | . — |
| Name: Harding & Associates Tax Services, Inc. HARDING BELL | 27em A70 |
| fice Address: 113 Pontotoc Plaza | |
| Auburndale , Florida 33823 | |
| (City) (Zip code) | |

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: | |
| | <u>:</u> |
| Vice Chairman: | |
| Address: | C 29 |
| | |
| Director: Kelly McCarthy | |
| Address: 26 Cordelia Crescent | |
| Torbay, Newfoundland A1K 1N2 Canada | |
| Director: | W - 1 W - |
| Address: | |
| | |
| B. OFFICERS | |
| President: | |
| Address: | |
| | |
| Vice President: | |
| Address: | |
| | |
| Secretary: | |
| Address: | |
| Treasurer: | |
| Address: | |
| NOTE: If necessary, you may attach an addendum to the application listing additional o | fficers and/or directors. |
| 12. Keely McCarthy Signature of Director or Officer | |
| Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affin are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S. Kelly McCarthy, Director | rms that the facts stated herein |

GOVERNMENT OF NEWFOUNDLAND AND LABRADOR Service NL $\,$

CORPORATIONS ACT

CERTIFICATE OF GOOD STANDING

OZINĖ INNY UN STAIE VALI AMASSEEL FLORIDA

Corporation Name:

VENTURE IT GROUP INC.

Corporation Number: 69075

Date of Incorporation: December 19, 2012

I certify that this Corporation has filed all documents required under the Corporations Act of Newfoundland and Labrador and is in Good Standing.

7em Togl

REGISTRAR OF COMPANIES For Province of Newfoundland and Labrador December 19, 2014