

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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.

(((H15000007234 3)))



H150000072343ABOV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA0000000023
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.****

Email Address: _____

RECEIVED
15 JAN -9 PM 1:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION
COMMODITY MANAGEMENT ADVISORY & SOLUTIONS
INC.**

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

15 JAN 10 PM 2:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

15 JAN -9 PM 2:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

FILED

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Commodity Management Advisory & Solutions 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:

Name of Person

Firm/Company

Address

City/State and Zip code

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

For further information concerning this matter, please call:

Name of Person

at (_____)

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. Commodity Management Advisory & Solutions Inc.

(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. Delaware 3. 47-2488505
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. December 4, 2014 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4406 SW 103rd Court, Gainesville, Florida 32608

(Principal office address)

4406 SW 103rd Court, Gainesville, Florida 32608

(Current mailing address)

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

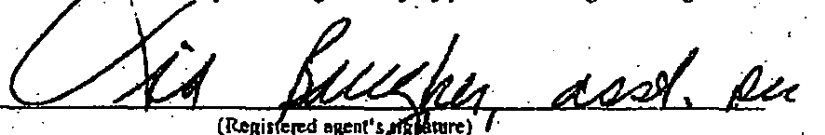
Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Rd.

Plantation, Florida 33324
(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.

FILED
15 JAN -9 11:21 AM
TALLAHASSEE FLORIDA
SECRETARY OF STATE

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

A. DIRECTORS

Chairman: Tarun Bhattacharya

Address: 4406 SW 103rd Court, Gainesville, Florida 32608

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Tarun Bhattacharya

Address: 4406 SW 103rd Court, Gainesville, Florida 32608

Vice President: _____

Address: _____

Secretary: Tarun Bhattacharya

Address: 4406 SW 103rd Court, Gainesville, Florida 32608

Treasurer: Tarun Bhattacharya

Address: 4406 SW 103rd Court, Gainesville, Florida 32608

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

12. Tarun K. Bhattacharya

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.817.153, F.S.

13. Tarun Bhattacharya, President

(Typed or printed name and capacity of person signing application)

15 JAN - 9 11 21 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMMODITY MANAGEMENT ADVISORY & SOLUTIONS 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 EIGHTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMMODITY MANAGEMENT ADVISORY & SOLUTIONS INC." WAS INCORPORATED ON THE FOURTH DAY OF DECEMBER, A.D. 2014.

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


FILED
15 JAN -9 11 2:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

5651617 8300

150027055

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2021955

DATE: 01-08-15