

F/500000/646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

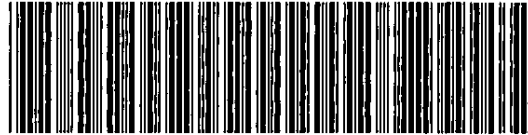
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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[Signature] 04/17/15

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Wyvern Consulting Incorporated
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:

Maryann Semmens

Name of Person

Wyvern Consulting

Firm/Company

10 North Main Street, Suite B

Address

Yardley, PA 19067

City/State and Zip code

accounting@wyvernltd.com

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

For further information concerning this matter, please call:

Maryann Semmens at (800) 946-4626

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:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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. Wyvern Consulting LTD., INCORPORATED

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey

(State or country under the law of which it is incorporated)

3. 383656820

(FEI number, if applicable)

4. 08/12/2002

(Date of incorporation)

5. Perpetual

(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. 10 North Main Street, Suite B, Yardley, PA 19067

(Principal office address)

10 North Main Street, Suite B, Yardley, PA 19067

(Current mailing address)

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

Name: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee

(City)


Florida 33470

(Zip code)

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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.

 Sara Brantigan on behalf of InCorp Services, Inc.
(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

Director
Chairman: Vincent F. Santulli

Address: 116 Playa Rienta Way
Palm Beach Gardens, FL 33418

Director
Vice Chairman: Shawn Vick

Address: PO Box 751
Alexandria Bay, NY 13607

Director: Nick Sabatini

Address: 710 Annie Rose Ave
Alexandria, VA 22301

Director: Arthur Dawley

Address: 10 North Main Street, Suite B
Yardley, PA 19067

B. OFFICERS

President: Arthur Dawley, CEO

Address: 10 North Main Street, Suite B
Yardley, PA 19067

Vice President: _____

Address: _____

Secretary: Hamad AlZeer

Address: Aster Building-3rd Floor, King Abdulaziz Rd (Al Malek), PO Box 13322, Jeddah 21493 Kingdom of Saudi Arabia

Treasurer: Fuad Syed, CFO

Address: Aster Building-3rd Floor, King Abdulaziz Rd (Al Malek), PO Box 13322, Jeddah 21493 Kingdom of Saudi Arabia

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. Arthur Dawley, _____, Chief Executive Officer
(Typed or printed name and capacity of person signing application)

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**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

WYVERN CONSULTING LTD

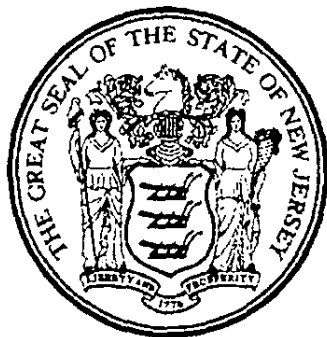
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on August 12, 2002.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*Incorp Services Inc.
208 West State St.
Trenton, NJ 08608*



Certification# 135804405

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
3rd day of April, 2015*

*Andrew P. Sidamon-Eristoff
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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