

From:

07/02/2015 09:19

#657 P.001/004

Division of Corporations

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F1500002903  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800) 221-2972  
Fax Number : (888) 692-9256

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address: \_\_\_\_\_

FILED  
15 JUL -2 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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15 JUL -2 AM 10:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION  
ALLOS CONSULTING USA INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

J. HARRIS  
JUL 06 2015

Electronic Filing Menu

Corporate Filing Menu

Help

**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. Allos Consulting USA 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)  
DELAWARE

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/7/2014 5. PERPETUAL  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 200 South Biscayne Boulevard, Suite 2790, Miami, FL 33131  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

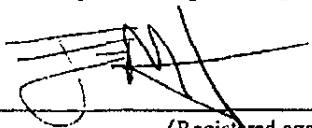
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.  
Office Address: 155 Office Plaza Drive, 1st Fl.  
TALLAHASSEE, Florida 32301  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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) JOSE MOJICA, ASST. SECY.

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.

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

**A. DIRECTORS**

Chairman: Emilio Orlandini  
Address: 200 South Biscayne Boulevard, Suite 2790, Miami, FL 33131

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

President: Emilio Orlandini  
Address: 200 South Biscayne Boulevard, Suite 2790, Miami, FL 33131

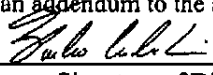
Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: \_\_\_\_\_  
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

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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 11 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. Emilio Orlandini - PRES.  
(Typed or printed name and capacity of person signing application)

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# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALLOS CONSULTING USA 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 JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALLOS CONSULTING USA INC." WAS INCORPORATED ON THE SEVENTH DAY OF AUGUST, A.D. 2014.

5582860 8300

150998625



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2519007

DATE: 07-01-15