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(Re	equestor's Name)				
(Ad	ddress)				
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(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

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SECRETARY OF STATE

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COVER LETTER

TO: New Filing	g Section f Corporations			
_	CR Solutions	s, Inc.		
SUBJECT.			n - must include suffix	
Dear Sir or Madan	ո։			
"Certificate of Exi		ite of Good Sta	r Authorization to Transac anding" and check are sub less in Florida.	
Please return all co	orrespondence conce	rning this matte	er to the following:	
Eyal Barsk	У			
		Name of	Person	
OCR Solut	ions, Inc.			
		Firm/Co	npany	
6735 Conr	oy Rd #207			
		Add	ress	
		City/State	and Zip code	
Orlando, FL	32835			
	E-mail addre	ess: (to be used	for future annual report r	notification)
For further information	ation concerning this	matter, please	call:	
Eyal Barsk	у	_{at (} 321	, 332-9900	
Name of F	Person		Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS:			MAILING ADDRESS:	
New Filing Section			New Filing Section Division of Corporations	
Division of Corporations Clifton Building			P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301			Tallahassee, FL 32314	
Enclosed is a checl	k for the following ar	nount:		
□ \$70.00 Filing F		ing Fee & (e of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



RECEIVED

15 JUL 20 PH 4: 10

FLORIDA DEPARTMENT OF STATESECRETARY OF STATE Division of Corporations TALLAHASSEE, FLORIDA

July 1, 2015

EYAL BARSKY OCR SOLUTIONS INC 6735 CONROY RD - # 207 ORLANDO, FL 32835

SUBJECT: OCR SOLUTIONS, INC. Ref. Number: W15000044945

We have received your document for OCR SOLUTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 515A00013873

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.	lutions, Inc.		·
	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATIO	N,"
OCR			
(If name unavail	able in Florida, enter alternate corporate na	ame adopted for the purpose of transaction	ng business in Florida)
_{2.} Vermont		1	
	ry under the law of which it is incorporated	3 (FEI number, if a)	pplicable)
		Perpetual	
	of incorporation)	(Duration: Year corp. will cease to	o exist or "perpetual")
6.			
J		ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liabil	lity)
_{7.} 6735 Con	roy Road Suite 207 Orla	ando FL 32835	
	(Principal office	address)	
Same as a	above		.
	(Current mailing	address)	SECRETAR SECRETAR
8. Name and street	et address of Florida registered agent:	(P.O. Box NOT acceptable)	74 20 F
Name:	Eyal Barsky		
Office Address:	6735 Conroy Rd. #207	7	D 4 8: 23 F STATE FLORIDA
	Orlando	, Florida 32835	A
	(City)	(Zip code)	
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to accept so application, I hereby accept the appo comply with the provisions of all status familiar with and accept the obligation	intment as registered agent and ag test relative to the proper and compl	ree to act in this capacity. ete performance of my

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: Eyal Barsky, Address: 6735 Conroy Rd. #207 Orlando, FL 32835 Vice Chairman: Candice Barsky Address: 6735 Conroy Rd. #207 Orlando, FL 32835 Director: **B. OFFICERS** President: Eyal Barsky Address: 6735 Conroy Rd. #207 Orlando, FL 32835 Vice President: Candice Barsky Address: 6735 Conroy Rd. #207 Orlando, FL 32835 Secretary: Eyal Barsky Address: 6735 Conroy Rd. #207 Orlando FL 32835 Treasurer: Eyal Barsky Address: 6735 Conroy Rd. 207 Orlando FL 32835 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Eyal Barsky CEO

STATE OF VERMONT OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

OCR SOLUTIONS, INC.

a Domestic Profit Corporation formed under the laws of the State of VERMONT, was filed for record in this office on Feb 01.2010

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution/ withdrawal have not been filed.

j July 16, 2015

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital.

REEDOM R. W. UNITY

James C. Condis

James C. Condos Vermont Secretary of State

Business ID: 0130450

Certificate Number: 2013175631001