

File 000000385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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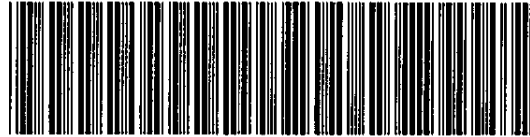
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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000280087530

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 27 2016
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CONXIT TECHNOLOGY 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:

Matthew J. Foster, Esq.

Name of Person

Allen Dell, P.A.

Firm/Company

202 S. Rome Avenue, Suite 100

Address

Tampa, FL 33606

City/State and Zip code

mfooster@allendell.com

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

For further information concerning this matter, please call:

Matthew J. Foster

at (813) 223-5351

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration 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. CONXIT TECHNOLOGY GROUP, 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. South Carolina

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

3. 26-0289106

(FEI number, if applicable)

4. 06/13/2007

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. 1/31/2016

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

7. 1000 N. Ashley Drive, Suite 300, Tampa, FL 33602

(Principal office address)

(Current mailing address, if different)

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

Name: Gary Walker, Esq.

Office Address: 202 S. Rome Avenue, Suite 100

Tampa

(City)

, Florida 33606

(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.

Gary Walker

(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

Chairman: David A. Schlaifer

Address: 1000 N. Ashley Drive, Suite 300, Tampa, FL 33602

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: David A. Schlaifer

Address: 1000 N. Ashley Drive, Suite 300, Tampa, FL 33602

Vice President: _____

Address: _____

Secretary: David A. Schlaifer

Address: 1000 N. Ashley Drive, Suite 300, Tampa, FL 33602

Treasurer: David A. Schlaifer

Address: 1000 N. Ashley Drive, Suite 300, Tampa, FL 33602

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

12. _____

Signature of Director or Officer

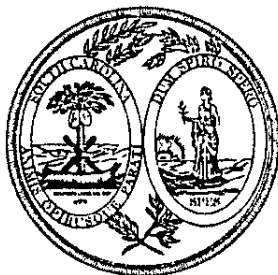
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. _____

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

FILED
JAN 26 PM 4:54
SECRET/RY/STATE
TALLAHASSEE, FLORIDA

The State of South Carolina



FILED
16 JAN 26 PM 4:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office of Secretary of State Mark Hammond


Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

CONXIT TECHNOLOGY GROUP, INC.,

a corporation duly organized under the laws of the State of South Carolina on June 13th, 2007, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal
of the State of South Carolina this 12th day
of January, 2016


Mark Hammond, Secretary of State

South Carolina Secretary of State

Business Filings Document Request

Payment Success – Download Documents

Your payment was processed successfully. Your receipt has been emailed to you.

Payment Time: 1/12/2016 3:21:00 PM

Please note your bank statement will reflect a payment to SC.GOV.

Payment and Request Summary

TPE Order ID: 42087926

Summary of Charges

Documents:	\$0.00
Certificate of Existence / Authority:	\$10.00
Electronic Records Access:	\$4.00
Total Amount Paid:	\$14.00

Reference ID: 1601121517009

Request Information

Business Entity Name:

ConXit Technology Group, Inc.

Date of Incorporation or Organization:

06/13/2007

Certificate Requested:

Yes

Requesting Party's Information

Matthew J. Foster, Esq.

mfooster@allendell.com

(813) 223-5351

Physical Address:

Edgar Brown Building
1205 Pendleton Street, Suite 525
Columbia, SC 29201

Mailing Address:

SC Secretary of State's Office
1205 Pendleton Street, Suite 525
Columbia, SC 29201
Phone: (803) 734-2158

FILED
16 JAN 26 PM 4:54
SECRETARY OF STATE
FILING SYSTEM/CLERK

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PATRICK A. TRABER
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OF COUNSEL:
ROBERT A. MORA
YVETTE F. RHODES, P.A.



202 S. ROME AVENUE
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TAMPA, FLORIDA 33606

Telephone (813) 223-5351
Main Facsimile (813) 229-6682
Family Law Facsimile (813) 769-3954

† BOARD CERTIFIED, MARITAL
& FAMILY LAW
♦♦ BOARD CERTIFIED, HEALTH LAW
♦ BOARD CERTIFIED, BUSINESS LITIGATION
‡ LL.M., TAXATION

A PROFESSIONAL
ASSOCIATION

WRITER'S EMAIL:
mfooster@allendell.com

January 19, 2016

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
16 JAN 26 PM 4:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: ConXit Technology Group, Inc.

Dear Clerk:

Enclosed for filing, please find the following:

- Application by Foreign Corporation for Authorization to Transact Business in Florida;
- Certificate of Existence issued by the South Carolina Secretary of State; and
- Allen Dell's draft number 44612 in the amount of \$70.00.

Should you require additional information, please do not hesitate to contact my office.

Very truly yours,

ALLEN DELL, P.A.

Matthew J. Foster

/cas
Enclosures

Allen Dell, P.A.