F160000002942

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
W16-44960 OFF. + Sign			

Office Use Only



900287082059

06/22/16--01021--002 **87.50



JUN 3 0 2016 Y SULKER



June 23, 2016

SALEEM M. QURESHI SOFTECH SOLUTIONS INC. 3895 OLD SETTLEMENT RD. MERRITT ISLAND, FL 32952

SUBJECT: SOFTECH SOLUTIONS INC.

Ref. Number: W16000044960

We have received your document for SOFTECH 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):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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

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.

Karen A Saly Regulatory Specialist II

Letter Number: 516A00013275

COVER LETTER

Division of Corporations				
SUBJECT: SOFTECH 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:				
SALEEM M. QURESHI				
Name of Person	-			
SOFTECH SOLUTIONS, Inc.				
Firm/Company				
3895 DLD SETTLEMENT RD				
. Address	_			
MERRITT ISLAND, FL 32952 City/State and Zip code				
City/State and Zip code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
SALEEM QURESHI at (703) 298-5410 Name of Person Area Code Daytime Telephone Number				
Name of Person Area Code Daytime Telephone Number				
STREET/COURIER ADDRESS: MAILING ADDRESS:				
Registration Section Registration Section				
Division of Corporations Division of Corporations P.O. Box 6327				
2661 Eventury Contact Circle				
Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
The state of the s				
Enclosed is a check for the following amount: \$70.00 Filing Fee	s &			

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FO. SO (Enter name of controls)	E WITH SECTION 607.1503, FLORIDA STATE REIGN CORPORATION TO TRANSACT BUT F TECH SOLUTION Corp." "Inc," "Co," or "Corp.")	SINESS IN THE STATE OF FI ONS, INC.	LORIDA.
(If name unavail	able in Florida, enter alternate corporate name ado		-
(State or count)	ry under the law of which it is incorporated)	(FEI number, if ap	plicable)
. Date	ne 2000 5	(Date of duration, if other	than perpenual)
·	e of incorporation) 06/06/20/	6	• • ,
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502	orida, if prior to registration)	itu)
3895	OLD SETTLEMENT	· · · · · · · · · · · · · · · · · · ·	
. <u>///15</u>		office address)	7-324 N.D. 1 P3 - 10
	(Current mailing a	ddress, if different)	
Nome and stre	et address of Florida registered agent: (P.O. I	lov NOT accentable)	<u> 単質</u> あ
	SALGEM M. QURE		JUN 27
Name:			W 27 AH II: 05 ASSEE, FLORID,
Office Address:	3895 OLD SETTLEMENT		
	MERRITT ISLAND (City)	_ , Florida <u>32952</u>	0.000 0.000 0.000 0.000
	(City)	(Zip code)	
laving been nan esignated in this arther agree to c	ent's acceptance: ned as registered agent and to accept service s application, I hereby accept the appointment comply with the provisions of all statutes rela- familiar with and accept the obligations of n	nt as registered agent and agr tive to the proper and comple	ree to act in this capacity. I the performance of my
uuca, unu 1 UM j	familias wan and accept the boligiaisms of a	r proposition us regissered agent	_
_	(Registered age	nt'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 SALEEM M. QURESHE	
Address: 3895 OLD SETTLEMENTRD	
Address: 3895 OLD SETTLEMENTRD MERRITTISLAND, FL32951	/
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
Andress.	
B. OFFICERS	2: 5
President:	SS Now of the same
Address:	
	to stantaling,
Vice President:	ORA S
Address:	
Secretary.	
Address:	
Treasurer:	· · · · · · · · · · · · · · · · · · ·
Address:	
NOTE: If necessary attach an addendum to the application listing additional officers	and/or directors.
12. Comments	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that	t the facts stated herein
are true and that he or she is aware that false information submitted in a document to the Departs a third degree felony as provided for in s.817.155, F.S.	
SALESMAN ALLES PRESTACATE	ICEO
(Typed or printed name and capacity of person signing application)	/

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That Softech Solutions Inc., is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is June 20, 2000;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: June 20, 2016

Joel H. Peck, Clerk of the Commission

CISECOM
Document Control Number: 1606205665