

F17000000881

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

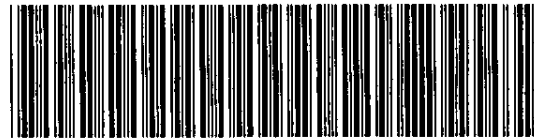
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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TALLAHASSEE FLORIDA

Office Use Only



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O SIMMONS

FEB 24 2017

FILED
17 FEB 23 PM 3:51



February 10, 2017

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

Re: XTIVIA, Inc. Corporate Registration

Dear Sir or Ma'am,

On September 6, 2013, XTIVIA, Inc. registered to do business in the State of Florida as part of a MyFloridaMarketPlace vendor registration. We did this to be able to bid on State of Florida business opportunities. Our Document Number with the Division of Corporations is P13000073885.

We recently discovered that our registration status is that of a Florida Domestic Profit Corporation rather than a Florida Foreign Profit Corporation. We have been incorporated in the State of Delaware since 1999 and we have enclosed a Certificate of Good Standing as evidence. Also enclosed is our Application by Foreign Corporation for Authorization to Transact Business in Florida. We have also recently filed Articles of Dissolution for our previous registration to correct this misclassification.

Please contact me should you need additional information, and thank you for your assistance in resolving this matter.

Sincerely,

A handwritten signature in black ink that reads "Gary M. Wall". The signature is written in a cursive, flowing style.

Gary M. Wall
XTIVIA, Inc. Contracts Manager
Email: gwall@xtivia.com
Tele: 720-452-2293

XTIVIA, Inc.

2035 Lincoln Highway, Suite 1010, Edison, NJ 08817 Tel: (732) 248 9399, Fax: (732) 248 5522 www.xtivia.com

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XTIVIA, 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:

Gary Wall

Name of Person

XTIVIA, Inc.

Firm/Company

2035 Lincoln Highway, Suite 1010

Address

Edison, NJ 08817

City/State and Zip code

swontor@xtivia.com

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

For further information concerning this matter, please call:

Gary Wall

720

452-2293

at (_____) _____

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. XTIVIA, 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. Delaware 3. 13-4054927
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 23, 1999 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. Incorrectly registered as Florida Profit Corporation on 09/06/13; #P13000073885
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2035 Lincoln Highway, Suite 1010, Edison, NJ 08817
(Principal office address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Sandra Wontor
- Office Address: 18854 Duquesne Dr.
- Tampa, Florida 33647
(City) (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.



(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.

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

A. DIRECTORS

Chairman: Moti Gutman
3 Abba Eban Blvd.
Address: Herzlia Pituach 46120, Israel

Vice Chairman: Eliezer Oren
3 Abba Eban Blvd.
Address: Herzlia Pituach 46120, Israel

Director: Moshe Attias
3 Abba Eban Blvd.
Address: Herzlia Pituach 46120, Israel

Director: Dennis R. Robinson
304 S. 8th Street, Suite 201
Address: Colorado Springs, CO 80905

B. OFFICERS

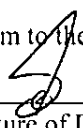
President: Dennis R. Robinson
304 S. 8th Street, Suite 201
Address: Colorado Springs, CO 80905

Vice President: n/a
Address: _____

Secretary: Ori Ben Zvi
2035 Lincoln Highway, Suite 1010, Edison, NJ 08817
Address: _____

Treasurer: Ori Ben Zvi
Address: _____

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. Ori Ben Zvi
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "XTIVIA, 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 FOURTH DAY OF JANUARY, A.D. 2017.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "XTIVIA, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF MARCH, A.D. 1999.

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



3019951 8300

SR# 20170041444

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 201817562

Date: 01-04-17