(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700302491587

08/16/17--01025--002 \*\*70.00

17 AUG 17 AM 11:49

AUG 1 7 2017 Y CU! KER

### **COVER LETTER**

TO:	Registration Section Division of Corporations				
	AP.ERCU FINANCIAL SER	VICES, INC.			
SUB.	IECT:			<del> </del>	
	Name o	f corporatio	n - mus	st include suffix	
Dear !	Sir or Madam:				
"Certi	nclosed "Application by Foreign Conficate of Existence," or "Certificate referenced foreign corporation to tr	of Good Sta	nding`	and check are subm	
	e return all correspondence concerni er A. DeGrave	ng this matte	er to the	e following:	
		Name of	Perso	n	
Walte	rs Levine & Lozano				
		Firm/Cor	npany	<del></del>	
601 B	ayshore Blvd., Suite 720				
		Add	ress		
Tamp	a, Florida 33606	1100			
		City/State	and Zip	o code	<del></del>
hdegr	ave@walterslevine.com				
	E-mail address	: (to be used	for fu	ure annual report no	tification)
For fi	urther information concerning this m	atter, please	call:		
Heather A. DeGrave 813 254-7474 at ()					
	Name of Person	Area Co		Daytime Telepho	one Number
	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:		MAILING AD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	ction porations
Encle	sed is a check for the following amo	ount:			
■ ST	70.00 Filing Fee			3.75 Filing Fee & titled Copy	S87.50 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.

	orporation; must include "INCORPORATED," "Corp," "Inc." "Co." or "Corp.")	COMPANY," "CORPORATION."	
Apercu Financia	d Services, Inc.		
(If name unavaila New Jersey	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting b	usiness in Florida)
	3. <u> </u>		
08/19/2010	y under the law of which it is incorporated)		
·	of incorporation) 5		
(Date	of incorporation)	(Date of duration, if other the	in perpetual)
510 Thornali Stre	(SEE SECTIONS 607.1501 & 607.1502, et. #320, Edison, NJ 08837	F.S., to determine penalty hability)	
	ret, #320, Edison, NJ 08837	office address)	
·	(Principal of Parkway, 1st Floor West, Short Hills, NJ 070	office address)	
51 John F. Kenne  Name and street	(Principal of Parkway, 1st Floor West, Short Hills, NJ 070  (Current mailing a et address of Florida registered agent: (P.O. I Heather A. DeGrave	office address) 78 ddress, if different)	TO AUG
51 John F. Kenne  Name and street  Name:	(Principal of edy Parkway, 1st Floor West, Short Hills, NJ 070 (Current mailing a edy address of Florida registered agent: (P.O. I	office address) 78 ddress, if different)	TALLAHASSEE
51 John F. Kenne 3. Name and street	(Principal of Parkway, 1st Floor West, Short Hills, NJ 070  (Current mailing a et address of Florida registered agent: (P.O. I Heather A. DeGrave 601 Bayshore Blvd., Suite 720	office address) 78 ddress, if different)	TY AUG 17 AM II

#### 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.

41. Nantes and business addresses of officers and/or directors: A. DIRECTORS Chairman: Himanuhu Shah Address: 5/0 Thornall Street # 320 Edison NJ 08837 Vice Chairman: Anish Shah Address: 5/0 Thomas Steet \$320 Edinos, NJ 158837 Director: \_ Address: Director: \_\_\_ **B. OFFICERS** President: Address: Vice President: Address: Secretary: Alec Jaio Address: 178 East Hannuer Ave al-3 Cedar K-olly, NJ 0792> Treasurer: Alec Jan Address: 178 Eart Hanne Are 7/03 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 11 above) affirms that the facts stated herein re true and that he or she is aware that false information submitted in a document to the Department of State constitutes

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

third degree felony as provided for in s.817.155, F.S.

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

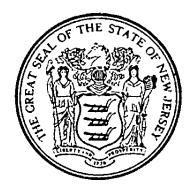
#### AP.ERCU FINANCIAL SERVICES INC 0400365598

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on August 19, 2010.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ANISH SHAH 510 THORNALL ST SUITE 320 EDISON, NJ 08837



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 9th day of August, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number : 6081751008

Verify this certificate ordine at

https://www.Lstate.nj.us/TYTR\_StandingCert/JSP/Ferify\_Cert.jsp