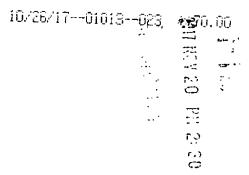
F1700005251

| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | · #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



100304902381



J. HARRIS

COVER LETTER

| TO: | Registration Section Division of Corporation | s | | | |
|----------|---|---|------------|--|--|
| SUBJ | ECT: Polaris DR, Inc | | | | |
| | | Name of corporati | on - must | include suffix | |
| Dear S | ir or Madam; | | | | |
| "Certif | closed "Application by Forces of Existence," or "Coreferenced foreign corpor | ertificate of Good St | tanding" : | and check are sul | |
| Please | return all correspondence | concerning this mat | ter to the | following: | |
| Deepak | k, Ahuja | | | | |
| | | Name o | of Person | | |
| Polaris | DR, Inc | | | | |
| | | Firm/Co | ompany | | |
| 2901 N | l. Dallas Parkway, Suite 32 | 0 | | | |
| | | Ade | dress | | |
| Plano. | TX 75093 | | | | |
| | | City/State | and Zip | code | |
| dahuja | @polarisforensics.com | | | | |
| | E-mai | l address: (to be use | d for futu | re annual report | notification) |
| For fur | ther information concerni | ng this matter, please | e call: | | |
| Deepa | Deepak Ahuja at (469) 467-4660 | | | | |
| | Name of Person | Area Co | ode ' | Daytime Telep | nhone Number |
| Facility | STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301 | s `ircle | | MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F | Section orporations 7 |
| | | wing amount: .75 Filing Fee & ctificate of Status | | 5 Filing Fee & fied Copy | \$87.50 Filing Fee. Certificate of Status & Certified Copy |



October 27, 2017

AHUJA DEEPAK 2901 N DALLAS PARKWAY, SUITE 320 PLANO, TX 75093

SUBJECT: POLARIS DR, INC. Ref. Number: W17000086362

We have received your document for POLARIS DR, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Jenna D Harris
Regulatory Specialist II
Letter Number: 217A00021792

317 NBY 20 PH 2: 50

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.

| Polaris DR, Inc | | | | |
|------------------|---|---------------------------------------|--|---|
| | orporation: must include "INCORPORATED," lorp," "Inc," "Co," or "Corp,") | "COMPANY," "CORPORATION | | |
| | | | | |
| (If name unavail | able in Florida, enter alternate corporate name ac | lopted for the purpose of transacting | g business in Florida) | , |
| Texas | 3. 4 | 7-1755376 | | |
| (State or countr | y under the law of which it is incorporated) | (FEI number, if app | olicable) | _ |
| 5/15/2014 | 5. | | | |
| (Date | of incorporation) | (Date of duration, if other) | than perpetual) | _ |
| | | | | |
| | (Date first transacted business in l | | | _ |
| | (SEE SECTIONS 607,1501 & 607,150 | 2, F.S., to determine penalty liabili | (y) | |
| 2901 N. Dallas P | kwy. STE 320, Plano, TX 75093 | | | _ |
| | (Principa | l office address) | 3. 4. 22 | |
| | | | 22 Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z | |
| | (Current mailing | address, if different) | : 5 | G |
| | | | 20 | 1 |
| Name and street | et address of Florida registered agent: (P.O. | Box NOT acceptable) | | |
| Name: | Northwest Registered Agent, LLC. | | . ? | |
| | 2020 N. Pocky Point Dr. STE 1504 | | : : : : | |
| ffice Address: | 3030 N, Rocky Point Dr. STE 150A | <u> </u> | 7. | |
| | Tampa | Florida <u>33607</u> | | |
| | (City) | (Zin code) | | |

Registered agent's acceptance:

ing been named as registered agent and to accept service of process for the above stated corporation at the place gnated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I ser agree to comply with the provisions of all statutes relative to the proper and complete performance of my s, and I am familiar with and accept the obligations of my position as registered agent.



ached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to artment of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction e law of which it is incorporated.

| A. DIR | ECTORS | | | |
|-------------|--|------------|---------------------|--------------------|
| Chairman | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | |
| | | | | |
| Vice Cha | imun: | | | |
| | | | | |
| | | | | |
| Director: | Deepak, Ahuja | | | |
| Address: | 2901 N. Dailas Pkwy, Ste 320 | | | |
| | Plano, TX 75093 | | | |
| Director: | | | | |
| | | | | |
| | | | | |
| B. OFF | ICERS | | | |
| President | Deepak, Ahuja | | | |
| Address: | 2901 N. Dalias Pkwy, Ste 320 | | در در | |
| | Plano, TX 75093 | 4.5 | コ だ | |
| Tice Pres | ident. | | N 2 (| EPI eve, |
| | | ., | <u>"</u> | |
| | | | 5 | |
| retary | | z. | (i) (C) | |
| - | | | | |
| | | | | |
| | | | | |
| :ss: E:, | If necessary you may attach an addendum to the application listing additional officers at | nd/or dire | ctors. | |
| ic | Signature of Director or Officer ter or director signing this document (and who is listed in number 11 above) affirms that and that he or she is aware that false information submitted in a document to the Department of the Depa | ine racis | stated ate con | herein stitutes |
| 9 | (Typed or printed name and capacity of person signing application) | | | |
| | (1) ped of printed mane and capacity of person signing application) | | | |

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

Florida Document Number: W17000086362

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Rolando B. Pablos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document. Certificate of Formation for Polaris DR, Inc. (file number 801870647), a Domestic For-Profit Corporation, was filed in this office on October 23, 2013.

It is further certified that the entity status in Texas is in existence

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 03, 2017.



(Z)

Rolando B. Pablos Secretary of State