Florida Department of State

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pivision of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION SUFI NETWORK SERVICES, INC.

Certificate of Status	; 1
Certified Copy	0
Page Count	04
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S. WARREN

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	SERVICES, INC.	OVER ANIXAR RECORDED ATTO	NT ''
(Enter name of col "Inc.," "Co.," "Co:	poration; must include "INCORPORATED," "Cp," "Inc," "Co," or "Corp.")	OMPANT, CORORATIO	ν,
			L. Clarido
(If name unavailab DELAWARE		884723	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
(Date of incorporation)		(Date of duration, if other than perpetual)	
• • • • • • • • • • • • • • • • • • • •	(Principal o	ffice address)	
	(Principal o	ffice (address)	
	(Current mailing ac	ddress, if different)	7 OFIC 4
Name and stree	address of Florida registered agent: (P.O. B CLIFFORD I. HERTZ, P.A.	ox NOT acceptable)	H4 8-
ffice Address:	ONE NORTH CLEMATIS STREET, SUITE 500	_	
Title Tudioso.	WEST PALM BEACH	33401 , Florida	□
	(City)	(Zip code)	
laving been name esignated in this	nt's acceptance: ed as registered agent and to accept service application, I hereby accept the appointmen amply with the provisions of all statutes rela amiliar with and accept the obligations of m	it as registerea agent and up live to the proper and comp	lete performance of my
uties, and I am f			

^{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 JAMES D. PEARSON Chairman: 28 W. GRAND AVE., MONTVALE, NJ 07645 Address: ___ Vice Chairman: Address: STEPHEN E. MYERS Director: 28 W. GRAND AVE., MONTVALE, NJ 07645 Address: _____ MICHAEL C. ANDERSON Director: 28 W. GRAND AVE., MONTVALE, NJ 07645 Address: ____ B. OFFICERS JAMES D. PEARSON President: 28 W. GRAND AVE., MONTVALE, NJ 07645 Address: Vice President: Secretary: ____ Address: ___ Address: 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 are true and that he or she is aware that false information sybmitted in a document to the Department of State constitutes

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

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

JAMES D. PEARSON, PRESIDENT

JAMES D. PEARSON, PRESIDENT

Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SUFI NETWORK SERVICES, 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 EIGHTH DAY OF DECEMBER, 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 "SUFI NETWORK SERVICES, INC." WAS INCORPORATED ON THE NINTH DAY OF APRIL, A.D. 1996.

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

2611997 8300 SR# 20177469915

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