

5/9/2018

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32399

FOREIGN PROFIT/NONPROFIT CORPORATION
CYNET SYSTEMS INC.

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**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.*

CYNET SYSTEMS INC.

1. _____
(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)
Virginia N/A

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
10/26/2010

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability).
43480 YUKON DR STE 202, ASHBURN, VA 20147

7. _____
(Principal office address)
44790 MAYNARD SQ STE 190, ASHBURN, VA 20147

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NC acceptable)

Name: REGISTERED AGENTS INC.

Office Address: 3030 N. Rocky Point Drive, STE 150A

TAMPA, Florida 33607
(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: ASHWANI MAYUR

43480 YUKON DR STE 202, ASHBURN, VA 20147

Address: _____

Director: _____

Address: _____

B. OFFICERS

ASHWANI MAYUR

President: 43480 YUKON DR STE 202, ASHBURN, VA 20147

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Ashwani Mayur

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.

Ashwani Mayur, President

13. _____

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

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That CYNET SYSTEMS INC. is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is October 26, 2010;

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.

2018
FEB 10 A
SS



Signed and Sealed at Richmond on this Date:
May 9, 2018.

Joel H. Peck

Joel H. Peck, Clerk of the Commission