

# F18000005338

Division of Corporations

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000333372 3)))



H180003333723ABC/

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
 Doing so will generate another cover sheet.

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

From:  
 Account Name : REGISTERED AGENTS INC.  
 Account Number : I20090000081  
 Phone : (307)200-2803  
 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

SECRETARY OF STATE  
 FLORIDA  
 FTS

NOV 21 PH12:47

**FILED**

**FOREIGN PROFIT/NONPROFIT CORPORATION**

FTS Solutions, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

2018 NOV 21 PM 7:49

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

11/20/18  
 1/1

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. FTS Solutions, 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. Texas 3. N/A  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 1, 2005 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)

7. 3030 N. Rocky Point Dr. STE 150A Tampa, FL 33607  
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Northwest Registered Agent, LLC.

Office Address: 3030 N. Rocky Point Dr. STE 150A

Tampa , Florida 33607  
(City) (Zip code)

NOV 21 2012  
12:47  
SECRETARY OF STATE  
FLORIDA  
RECEIVED  
REGISTRATION  
SECTION 607.1503

**FILED**

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.*

Tom Glover

(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: **ENRIQUE GONZALEZ** \_\_\_\_\_

Address: **3030 N. Rocky Point Dr. STE 150A** \_\_\_\_\_

**Tampa, FL 33607** \_\_\_\_\_

Director: **SHIV MATHUR** \_\_\_\_\_

Address: **3030 N. Rocky Point Dr. STE 150A** \_\_\_\_\_

**Tampa, FL 33607** \_\_\_\_\_

**B. OFFICERS**

President: **SUMIT MATHUR** \_\_\_\_\_

Address: **3030 N. Rocky Point Dr. STE 150A** \_\_\_\_\_

**Tampa, FL 33607** \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: **SHIV MATHUR** \_\_\_\_\_

Address: **3030 N. Rocky Point Dr. STE 150A Tampa, FL 33607** \_\_\_\_\_

RECEIVED  
FLORIDA  
DEPARTMENT OF STATE  
REGISTRATION  
NO. 12-47

Treasurer: **SHIV MATHUR** \_\_\_\_\_

Address: **3030 N. Rocky Point Dr. STE 150A Tampa, FL 33607** \_\_\_\_\_

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

12. *Sumit Mathur* \_\_\_\_\_

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. **SUMIT MATHUR, President** \_\_\_\_\_

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

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



Rolando B. Pablos  
Secretary of State

## Office of the Secretary of State

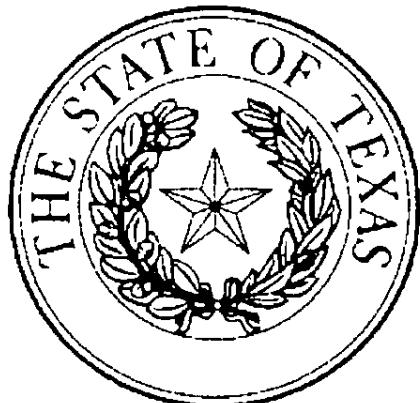
### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for FTS Solutions, Inc. (file number 800525733), a Domestic For-Profit Corporation, was filed in this office on August 01, 2005.

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

18 NOV 21 PM12:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

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 20, 2018.



A handwritten signature in black ink, appearing to read "R B Pablos".

Rolando B. Pablos  
Secretary of State