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## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: DeNovo Global Techn	nologies, Inc.					
	Name of corporati	ion - must i	nclude suffix			
Dear Sir or Madam:						
The enclosed "Application by Fore "Certificate of Existence," or "Certabove referenced foreign corporations."	tificate of Good S	tanding" ar	nd check are sub			
Please return all correspondence co	oncerning this mat	tter to the fo	ollowing:			
Louis M. Esposito						
	Name	of Person				
DeNovo Global Technologies, Inc						
	Firm/C	ompany				
17902 East Strack Drive						
	Ad	dress				
Spring. Texas 77379						
Lou.Esposito@denovogt.com	City/State	e and Zip co	ode			
E-mail a	ddress: (to be use	d for future	annual report r	notification)		
For further information concerning	this matter, pleas	e call:				
Louis M. Esposito	at ( <sup>281</sup>	<sub>1</sub> 251-0	251-0399			
Name of Person	Area C	ode	Daytime Telepl	hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following	ng amount:					
	Filing Fee & icate of Status		Filing Fee & ed Copy	\$87.50 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.

1.							
	(Enter name of corporation; must include "INCO "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	RPORATED," "	COMPANY,	"CORPORATION,"			
	DeNovoGT, Inc						
	(If name unavailable in Florida, enter alternate co	rporate name ado	opted for the p	purpose of transacting business in Florida)			
2.	Texas		3. 800902649				
	(State or country under the law of which it is incorporated)		-	(FEI number, if applicable)			
4.	11/28/2007 048	5.					
4. 1 (Date of incorporation)			(Date of duration, if other than perpetual)				
6.							
7.	(Date first transac (SEE SECTIONS 607. 17902 East Strack Drive, Spring, Texas 77379	1501 & 607.1502		rmine penalty liability)			
		( merpar	317700 4441000	,			
	(Current mailing address, if different)						
8.	. Name and <u>street address</u> of Florida registere	d agent: (P.O.)	Box <u>NOT</u> ac	eceptable)			
	Name: Mr. BAADAL De.	LiWALA					
0	office Address: 11819 AURELIO	LANE	_				
	ORLANDO		, Florida	32827			
	(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: Louis M. Esposito Address: 22 Scarlet Sage Place The Woodlands, Texas 77380 Vice Chairman: \_\_\_\_\_ Address: Address: **B. OFFICERS** President: Louis M. Esposito Address: 22 Scarlet Sage Place The Woodlands, Texas 77380 Vice President: Ravishand Katta Address: 9118 Memorial Trail Drive Spring, Texas 77379 Secretary: Lauren T. Esposito Address: 11 Firethorne Place, The Woodlands Texas 77382 Treasurer: Louis M. Esposito Address: 22 Scarlet Sage Place, The Woodlands, Texas 77379 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 submitted in a document to the Department of State constitutes

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

13. Louis M. Esposito - President

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



## Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

> DENOVO GLOBAL TECHNOLOGIES, INC. Filing Number: 800902649

Certificate of Formation Change of Registered Agent/Office November 28, 2007 June 08, 2011

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 January 02, 2019

Phone: (512) 463-5555

Prepared by: SOS-WEB

David Whitley Secretary of State

TID: 10266

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services Document: 858339210002