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(Re	equestor's Name)	
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PICK-UP	TIAW	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 ... 850-656-4724

D	ate:	05/09/2019	_ \
		Acc#I20160000072	- w: DW
Name:	CAMBA	ALT SOLUTIONS, INC.	
Document #:			
Order #:	TBA - M	1 CONNOLLY	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🚺	Cert Plair COG	[]	
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amo	ount:\$ 78.75	

COVER LETTER

_	stration Sec sion of Corp					
SUBJECT:	Cambalt S	olutions, Inc.				
SOBJECT.		Name o	of corporati	on - m	ust include suffix	
Dear Sir or N	/ladam:					
"Certificate	of Existence		of Good St	andin	g" and check are sub	ct Business in Florida," mitted to register the
Please return	all corresp	ondence concerni	ng this mat	ter to	the following:	
Clifford Eshe	r					
		•	Name c	of Pers	on	
Foley Hoag L	LP					
	-	-	Firm/Co	mpan	y	
155 Seaport B	Boulevard					
			Ado	Iress		
Boston, MA	02210					
<u></u>			City/State	and Z	Cip code	
cesher@foley	hoag.com					
		E-mail address	: (to be use	d for f	uture annual report r	notification)
For further in	nformation o	concerning this m	atter, please	e call:		
Clifford Esher	•		617	,	832-1767	
Nan	ne of Person		at (Area Co) _ ode	Daytime Telep	none Number
Regi: Divis Clifte 2661	stration Sec sion of Corp on Building	orations Center Circle	S:		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection prporations
Enclosed is a	check for t	he following amo	unt:			
□ \$70.00 Fi	ling Fee	S78.75 Filing Certificate o			8.75 Filing Fee & crtified Copy	S87.50 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.

	able iii r tortoa, enter alternate corporate nam	e adopted for the purpose of transacting b	usiness in Florida)
2. Delaware	ry under the law of which it is incorporated)	3	
	•	(FEI number, if applic	cable)
4. August 29, 201	•	Date of duration, if other tha	
(Date	of incorporation)	(Date of duration, if other tha	n perpetual)
6			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
50 Milk Street B	oston, MA 02110	1302, P.S., to determine penalty hability)	
7			
	(Princ	ripal office address)	
	(6	E. d. C. C. C.	
	(Current mai	ling address, if different)	SERVING A
		0.0	
8. Name and stree	of address of Florida registered agents (D	() Ray N() Lagaretable)	
	et address of Florida registered agent: (P	.O. Box <u>NOT</u> acceptable)	. و .
8. Name and <u>stree</u> Name;	et address of Florida registered agent: (P C T Corporation System	.O. Box <u>NOT</u> acceptable)	الم دن
Name:		.O. Box <u>NOT</u> acceptable)	الم دن
	C T Corporation System	33324	الم دن
Name:	C T Corporation System 1200 South Pine Island Road	.O. Box <u>NOT</u> acceptable), Florida 33324(Zip code)	. و .

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.

(Registered agent's signature)

Olga Hinkel - VP

By:

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: ___ Ramakrishna Sudireddy Address: 50 Milk Street, Boston, MA 02110 Director: ________ Address: ___ **B. OFFICERS** President: Ramakrishna Sudireddy Address: 50 Milk Street, Boston, MA 02110 Vice President: Satyender Mahajan Secretary: 50 Milk Street, Boston, MA 02110 Treasurer: Ramakrishna Sudireddy Address: 50 Milk Street, Boston, MA 02110 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director br 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. Ramakrishna Sudireddy - President (Typed or printed name and capacity of person signing application)

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

DELAWARE, DO HEREBY CERTIFY "CAMBALT SOLUTIONS, 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 NINTH DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

TAYS OF THE PROPERTY OF THE PR

Authentication: 202792825

Date: 05-09-19