

F19000004555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

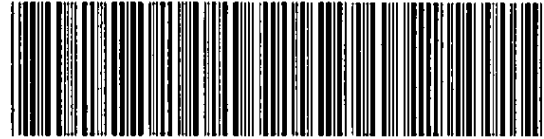
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19000076539

Office Use Only



600332672086

08/07/19--01019--008 \$78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

FAX

To: FDOR FAX:850-245-6030
From: IDENTITYTECH SOLUTIONS AMERICA INC
CC: TO WHOM IT MAY CONCERN
Date: 10-3-2019
Re: COMPLETE REGISTRATION OF FOREIGN FLORIDA CORPORATION

Comments: Find enclosed Delaware certification of Identitytech as a Delaware corporation in good standing.

Please complete the registration of Identitytech In Florida.

If I can be of any further assistance, please contact Neven at 888-703-7150

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2019

NEVEN BRAIL
8725 NW 18TH TERRACE
#105
MIAMI, FL 33172

SUBJECT: IDENTYTECH SOLUTIONS AMERICA INC
Ref. Number: W19000076539

We have received your document for IDENTYTECH SOLUTIONS AMERICA INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is already a foreign filing with this name.,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott
Document Specialist II

Letter Number: 819A00017015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: To register a foreign profit corporation to transact business in
Florida.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
Neven Brail

Name of Person
IDENTYTECH SOLUTIONS AMERICA INC

Firm/Company
8725 NW 18TH TERRACE #105

Address
MIAMI, FLORIDA 33172

City/State and Zip code
ACCOUNTINGUS@IDENTYTECH.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NEVEN BRAIL 888 703-7150

Name of Person at (_____) _____
Area Code Daytime Telephone 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 amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified 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.*

IDENTYTECH SOLUTIONS AMERICA INC

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
DELAWARE 83-2984668

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
JUNE 12 2019

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
JANUARY 1 2019

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
8725 NW 18TH TERRACE #105, MIAMI, FLORIDA 33172

7. _____
(Principal office address)

(Current mailing address, if different)

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

EPHRAM YEASHOUA

Name: _____

8725 NW 18TH TERRACE #105

Office Address: _____

MIAMI

33172

_____, Florida _____
(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

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

A. DIRECTORS

EPHRAM YEASHOUA

Chairman:

8725 NW 18TH TERRACE #105, MIAMI FLORIDA 33172

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

EPHRAM YEASHOUA

President:

8725 NW 18TH TERRACE #105, MIAMI FLORIDA 33172

Address:

Vice President:

Address:

Secretary:

Address:

NEVEN BRAIL

Treasurer:

8725 NW 18TH TERRACE #105, MIAMI FLORIDA 33172

Address:

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

12. 

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.

EPHRAM YEASHOUA - PRESIDENT

13.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



State of Delaware

SECRETARY OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 896
DOVER, DELAWARE 19903

8239174

06-12-2019

IDENTYTECH SOLUTIONS AMERICA INC
8725 NW 18TH TERRACE
SUITE 105
MIAMI, FL 33172

ATTN: EPHRAM YEASHOUA

DESCRIPTION**AMOUNT**

5353764 - IDENTYTECH SOLUTIONS AMERICA INC
Entity Status - Short Form

Certification Fee \$50.00

Expedite Fee, Same Day \$50.00

TOTAL CHARGES \$100.00

TOTAL PAYMENTS \$100.00

BALANCE \$0.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "IDENTYTECH SOLUTIONS AMERICA 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 EIGHTEENTH DAY OF SEPTEMBER,
A.D. 2019.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

for
9/23/19




Jeffrey W. Bullock, Secretary of State

5353764 8300

SR# 20197096384

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203620022

Date: 09-18-19