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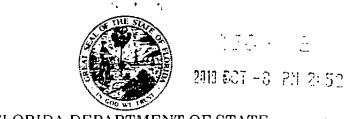
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2019

SURESHKUMAR PATEL 8860 COLUMBIA 100 PKWY, STE 104 COLUMBIA, MD 21045

SUBJECT: 1AJOB, INC

Ref. Number: W19000075990

We have received your document for 1AJOB, INC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 619A00016927

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
		laJob, INC			
SUBJ	ECT:	NI. C		·	
		Name of corpora	tion - must include suffix		
Dear S	Sir or Madam:				
"Certi	ficate of Existen	tion by Foreign Corporation ce," or "Certificate of Good ( gn corporation to transact bu	Standing" and check are sub	ct Business in Florida," omitted to register the	
Please	return all corres	pondence concerning this ma	atter to the following:		
	Raily M	lahajan			
	Job, INC	Name	of Person		
		Firm/C	Company		
886	0 Columbia 100 P		· · · · · · · · · · · · ·		
			ddress		
Col	umbia, MD 21045	j 			
		City/Sta	te and Zip code		
<u>ra</u>	iv@mi	ucpaonline	ed for future annual report r		
	<b>-</b>	E-mail address: (to be us	ed for future annual report r	notification)	
For fu	ther information	concerning this matter, plea	se call:	1	
Rai	liv Mak	Minal W 40	13 ) 259-00 <sup>0</sup>	91	
-333	Name of Perso	Majan at (HC)	Lode Daytime Telepl	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration S- Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclos	ed is a check for	the following amount:			
<b>□</b> \$7(	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified 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. TaJob, INC (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.") JaJob of Horida, INC (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) State of Delaware (FEI number, if applicable) (State or country under the law of which it is incorporated) Perpetual (Date of incorporation) (Date of duration, if other than perpetual) TBD (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 8860 Columbia 100 PKWY Suite 104 Columbia, MD 21045 (Principal office address) same (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation System Name: 1200 South Pine Island Road Office Address: \_\_\_\_\_\_, Florida <u>33394</u> (Zip code) Plantation

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 dertificate 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 Sureshkumar Patel Chairman: 13190 Clarksville Pike Address: Highland, ND 20777 Prashant Arivelu Vice Chairman: 102 Harvester Dr Address: Copley, OH 44321 Director: Director: Address: \_ **B. OFFICERS** Vice President: \_\_\_\_\_ Address: Secretary: Address: Address: 8860 Columbia 100 Pkuny Svite 104 Columbia, MD 21045 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

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

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

Kanv

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

DELAWARE, DO HEREBY CERTIFY "IAJOB; 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 FIFTEENTH DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "1AJOB, INC" WAS INCORPORATED ON THE EIGHTH DAY OF APRIL, A.D. 2019.

7363657 8300 SR# 20195965368

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

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Jaffray W. Bulloca, Secretary of State

Authentication: 203218212

Date: 07-15-19