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To:

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number: 110432003053 : (561)694-8107

: (561)214-8442 Fax Number

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

Pariveda Solutions, Inc.

Certificate of Status	
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

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Help

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. Pariveda Solution	·		COLUBATIVITA VICORDOR ATTONIO				
	orporation; must include orp," "Inc," "Co," or "Co		"COMPANY," "CORPORATION."				
(If name unavail	able in Florida, enter alt	ernate corporate name ad	lopted for the purpose of transacting	business in Florida)			
2. Texas		3.					
(State or country	ry under the law of whic	h it is incorporated)	(FEI number, if appl	icable)			
4. 12/13/2006		5					
(Date	of incorporation)		5. (Date of duration, if other than perpetual)				
6							
			Florida, if prior to registration) 2, F.S., to determine penalty liability	')			
_ 2811 McKinney	Ave #320, Dallas, TX 7						
1			street address)				
		·					
		(Current mailing	address, if different)				
				Ä,			
8. Name and stre	et address of Florida r	egistered agent: (P.O.	Box NOT acceptable)				
Name:	Corporate Creations	Network Inc.		2021 DEC 15 SECRETARY			
Office Address:	801 US Highway I North Palm Beach (City)			CD .			
			Florida 33408	PHI2: 18 OF STATE OF FLORIDA			
			(Zip code)	PRICE PRICE			
O Registered og	ent's acceptance:			∞ .			
Having been nan	ned as registered agen		e of process for the above stated				
designated in this	s application, I hereby	accept the appointme	ent as registered agent and agree	to act in this capacity. I			
juriner agree to c and I am familia	comply with the proving with and accept the	obligations of my posi	ative to the proper and complete tion as registered agent.	perjormance of my auties			
•	•	<u> </u>					
	Lun Lauren Und		rwood, Special Secretary				
_	· · · · · · · · · · · · · · · · · · ·	(Registered agent's sig	nature)				

^{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.

A. DIRECTORS SEE ATTACHED LIST □ Chairman Name: □ Chairman Name: □Vice Chairman Address: □Vice Chairman Address: □ Director □ Director □ President President □Vice President □ Vice President □ Treasurer ☐ Secretary ☐Treasurer ☐ Secretary Other ____ □Other _____ Other _____ Other _____ ☐ Chairman ☐ Chairman Name: _____ Name: Address: ☐ Vice Chairman Address: □ Vice Chairman Director □ Director □President President □Vice President □Vice President □Treasurer □ Secretary ☐ Treasurer ☐ Secretary □Other _____ ☐Other _____ □Other _____ Other _____ Name: Name: □Chairman ☐ Chairman □Vice Chairman Address: □Vice Chairman Address: Director □ Director □ President □ President ☐ Vice President □Vice President ☐ Treasurer ☐ Secretary Treasurer ☐ Secretary □Other _____ Other _____ □Other _____ □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Pariveda Solutions, Inc. Officers and Directors Attachment

/Bruce Ballengee -- Chief Executive Officer, Director -- 2811 McKinney Ave, #320, Dallas, TX 75204

-Kerry Stover - Chief Operating Officer, Director - 2811 McKinney Ave, #320, Dallas, TX 75204

James Kupferschmid - Chief Financial Officer - 2811 McKinney Ave, #320, Dallas, TX 75204

/Kristen Erler -- Secretary - 2811 McKinney Ave, #320, Dallas, TX 75204

✓Ed Fikse - Director - 2811 McKinney Ave, #320, Dallas, TX 75204

/Susan Conner – Director – 2811 McKinney Ave, #320, Dallas, TX 75204

Patti Johnson - Director - 2811 McKinney Ave, #320, Dallas, TX 75204

Marguerite McHale - Director - 2811 McKinney Ave, #320, Dallas, TX 75204

Dale Danilewitz - Director - 2811 McKinney Ave, #320, Dallas, TX 75204

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



John B. Scott 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, Certificate of Formation for Pariveda Solutions, Inc. (file number 800745979), a Domestic For-Profit Corporation, was filed in this office on December 13, 2006.

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

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 December 14, 2021.



John B. Scott Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Dial; 7-1-1 for Relay Services Document; 1102414070002