

CONFIDENTIAL

# F95000004879

OFFICE USE ONLY (Document #)

UCC FILING & SEARCH SERVICES  
(Requestor's Name)

526 EAST PARK AVENUE SUITE 200  
(Address)

TALLAHASSEE, FL 32301 (904) 681-6528  
(City, State, Zip) (Phone #)

487176

OFFICE USE ONLY

300001604183  
-10/03/95--01050--005  
\*\*\*\*122.50 \*\*\*\*122.50

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Agum, Inc. (Document #)  
(Corporation Name)
2. \_\_\_\_\_ (Document #)  
(Corporation Name)
3. \_\_\_\_\_ (Document #)  
(Corporation Name)
4. \_\_\_\_\_ (Document #)  
(Corporation Name)

95 OCT -9 PM 2:53

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

☒ Walk in ☐ Pick up time \_\_\_\_\_

☒ Certified Copy

☐ ARTICLES ONLY

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

☐ ALL CHARTER DOCS

☐ CERTIFICATE OF GOOD STANDING

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

- ☐ Certificate of FICTITIOUS NAME  
☐ FICTITIOUS NAME SEARCH  
☐ CORP SEARCH

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**HOLD FOR  
PICKUP BY  
UCC SERVICES**

Examiner's Initials

**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. AGUMM, INC.  
(Name of corporation must include the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. NEW YORK  
(State or country under the law of which it is incorporated)
3. 5/01/95 4. PERPETUAL  
(Date of Incorporation) (Duration-Year Corp. will cease to exist or "perpetual")
5. NOT APPLICABLE  
(Federal Employer Identification number, if applicable)
6. WILL START BUSINESS UPON RECEIPT OF AUTHORIZATION.  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)
7. 10636 NW 49TH STREET, CORAL SPRINGS, FL 33076  
(Current mailing address)

**9. Name and Street address of Florida registered agent:**

Name: MATTHEW RUTTER  
Office Address: 10636 NW 49TH STREET  
CORAL SPRINGS, Florida 33076  
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: Matthew Rutter

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 addresses of officers and/or directors.

**A. Directors:**

Chairman: AMARISH PARIKH  
Address: 30 HAVERFORD AVENUE  
SCAR DALE, NY 10583

Vice Chairman: MATTHEW RUTTER  
Address: 10636 NW 49TH STREET  
CORAL SPRINGS, FL 33076

Director: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**B. Officers:**

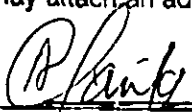
President: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

12.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 11 of the application)

13. AMARISH PARIKH. PRESIDENT  
(Type or print name and capacity of person signing application)

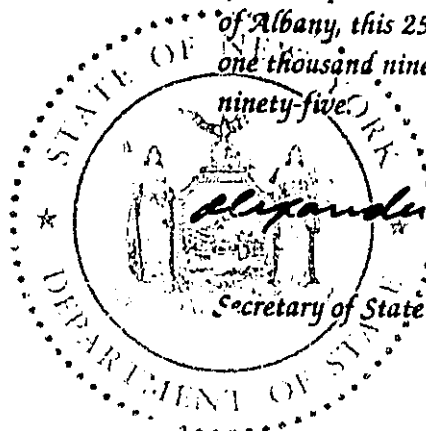
**State of New York** | **ss:**  
**Department of State**

I hereby certify, that the certificate of incorporation of AGUMM, INC. was filed on 05/01/1995, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

I further certify, that no other certificates have been filed by such corporation.

\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 25th day of August  
one thousand nine hundred and  
ninety-five.



*Alexander F. Treachwell*

Secretary of State

199508280288

95 OCT -9 PM 2:53

SECRETARY OF STATE  
DIVISION OF CORPORATIONS