

#### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000031545 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number: I20010000062

Phone : (323)962-8600

Fax Number : (323)962-3889

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

Email Address:

#### Foreign Limited Liability Company Covalense Technologies, LLC

	<u> </u>
Certificate of Status	0
Certified Copy	1
Page Count	07
Estimated Charge	\$155.00

FEB 1 1 2016

: 11

Electronic Filing Menu

Corporate Filing Menu

Help

#### COVER LETTER

SUBJECT: Covalense	Fechnologies, LLC	
	Name of Limited Liability Company	_
The enclosed "Application by Po Existence, and check are submitt	oreign Limited Liability Company for Authorization to Transact Business in Florida and to register the above referenced foreign limited liability company to transact bus	," Certificate of iness in Florida
Please return all correspondence	concerning this matter to the following:	
	Imelda Vasquez	
<del></del>	Name of Person	-
	Legalzoom.com, inc.	
	Firm/Company	-
	100 W. Broadway Suite 100	2014 FE
	Address $\pm \vec{r}_1$	
	Glendale, CA 91210	
·	City/State and Zip Code	I I
	prameela.kotnana@covalense.com	7 0
	E-mail address: (to be used for future annual report notification)	<b>ଫ୍ର</b> (ବ୍ର
For further information concerni		r <sub>k</sub>
lmelda Vasquez	323 962-8600	
Name	of Contact Person Area Code Daytime Telephone Number	_
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tullahussee, FL 32314		
Enclosed is a check for the T \$125.00 Filing Fee	following amount:  \$\sumsymbol{\Pi}\$\$ \$130.00 \text{ Filing Fee & }\sumsymbol{\Pi}\$\$ \$155.00 \text{ Filing Fee & }\sumsymbol{\Pi}\$\$ \$160.00 \text{ Filing Fee, 0}\$\$ Certified Copy of Status & Certified	

A ...

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.	L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternative Company," "L.L.C." or "LLC.")	ernate name must include "L	imited
Virginia		
2. (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, i	f applicable)	_
4.		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5 13718 Maple Sugar Ln.	2 × 2	-3
Herndon, VA 20171	AC. 7	_ 
(Street Address of Principal Office)	<i>₹</i> ,≥	-ar-
<sub>6.</sub> 13718 Maple Sugar Ln.	SE C	
Herndon, VA 20171	T. S.	
(Mailing Address)	22 · ·	Kuring 2 1 1 1
7. The name, title or capacity and address of the person(s) who has/have authority Prameela D. Kotnana, Member, 13718 Maple Sugar Ln., Herndon, VA 201		_
8. Attached is an original certificate of existence, no more than 90 days old, duly a having custody of records in the jurisdiction under the law of which it is organized acceptable. If the certificate is in a foreign language, a translation of the certificate must be submitted)	. (A photocopy is not	1
Signature of an authorized person  Signature of an authorized person  In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of a sware that any false information submitted in a document to the Department of State constitutes a third degree felony a Prameela D. Kotnana, Member	f perjury that the facts stated he sprovided for in s.817.155, F.S.	rein are true. I
Typed or printed name of signee		

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Covalense T	echnologies, LLC	
If unavailable,	the alternate to be used in the state of Florida is:	
2. The name a	and the Florida street address of the registered agent and office are:	2014 FEB 35 GRED TALLAHA
	InCorp Services, Inc.	
	(Name) 17888 67th Court North	SSEC SSEC
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Loxahatchee FI. 33470	K 52
	City/State/Zip	<del></del>

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

# Commonboealth & Hirginia



## State Corporation Commission

### CERTIFICATE OF FACT

## I Certify the Following from the Records of the Commission:

That Covalense Technologies, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is October 28, 2009; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: February 7, 2014

Joel H. Peck, Clerk of the Commission

CISECOM
Document Control Number: 1402075900