

M14000003206

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

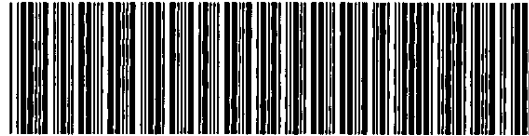
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B. BOSTICK
MAY 12 2014
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Capital Legal Solutions, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Harivadan J. Pandya

Name of Person

Capital Legal Solutions, LLC

Firm/Company

10521 Rosehaven St, Suite 300

Address

Fairfax, Virginia 22030

City/State and Zip Code

hpandya@capitalnovus.com

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

For further information concerning this matter, please call:

Harivadan J. Pandya

Name of Contact Person

at (**703**)

Area Code

226-1543

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

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

1. Capital Legal Solutions LLC

(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 alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Commonwealth of Virginia

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 41-2063932

(FEI number, if applicable)

4. Not yet transacted any business in Florida

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 10521 Rosehaven St, Suite 300

Fairfax, Virginia 22030

(Street Address of Principal Office)

6. 10521 Rosehaven St, Suite 300

Fairfax, Virginia 22030

(Mailing Address)

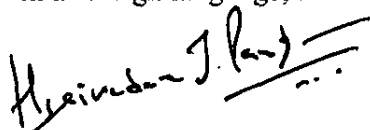
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Dharmesh Shingala, President

Gita Shingala, CEO

Harivadan J. Pandya, CFO

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



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 perjury that the facts stated herein are true. I am aware that any 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.)

Harivadan J. Pandya

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.

1. The name of the Limited Liability Company is:

Capital Legal Solutions, LLC

If unavailable, the alternate to be used in the state of Florida is:

Capital Novus

2. The name and the Florida street address of the registered agent and office are:

Gina Woolf

(Name)

1430 Gulf Blvd., # 410


Florida Street Address (P.O. Box NOT ACCEPTABLE)

Clearwater

FL 33767

City/State/Zip

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)

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That CAPITAL LEGAL SOLUTIONS, 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 18, 2002; 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.

2014-05-07 14:16:52

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



Joel H. Peck

Joel H. Peck, Clerk of the Commission



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 28, 2014

HARIVADAN J. PANDYA
10521 ROSEHAVEN STREET
SUITE 300
FAIRFAX, VA 22030

SUBJECT: CAPITAL LEGAL SOLUTIONS LLC
Ref. Number: W14000026735

We have received your document for CAPITAL LEGAL SOLUTIONS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 114A00009027