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W15-52-66-6

## **COVER LETTER**

TO: Registration Section Division of Corporation	18		
SUBJECT: INFOSEMANTIC	'S INC.		
SUBJECT.	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by F "Certificate of Existence," or "Cabove referenced foreign corporations."	Certificate of Good Star	nding" and check are sub	
Please return all correspondence NAREN THOTA	e concerning this matter	to the following:	
	Name of	Person	
INFOSEMANTICS INC.			
2605 SAGEBRUSH DR, SUITE 2	Firm/Con 207	apany	
FLOWER MOUND, TX 75028	Addro	ess	
NAREN.THOTA@INFOSEMAN	City/State a TICS.COM	nd Zip code	
E-ma	uil address; (to be used	for future annual report	notification)
For further information concern	ing this matter, please o	call:	
NAREN THOTA	972	365-0345	
Name of Person	Area Cod	Daytime Telep	phone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the follo	owing amount:		
	8.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2015

NAREN THOTA 2605 SAGEBRUSH DR SUITE 207 FLOWER MOUND, TX 75028 US

SUBJECT: INFOSEMANTICS INC Ref. Number: W15000052444



We have received your document for INFOSEMANTICS INC and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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 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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 915A00016366

Please And the Certificate of fact enclosed.

# 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.

	ple in Florida, enter alternate corporate name add	. , ,	iness in Florida)	•
2. TEXAS, USA	3	5-2938887		···
MAY 22 2001	under the law of which it is incorporated)	(FEI number, if applicable)		
		5. Perpetual (Date of duration, if other than perpetual)		_
_ 2605 SAGEBRUS	(Date first transacted business in Fl (SEE SECTIONS 607,1501 & 607,1502 H DR, SUITE 207, FLOWER MOUND, TX 750 (Principal)	, - tank to determine penalty informer,	<u> </u>	-
		address, if different)	SEP 28 JAHASSE	N. Se Sa
8. Name and street Name:	address of Florida registered agent: (P.O. I	Box NOT acceptable)	PM I2: 27 OF STATE E. FLORID	O
Office Address:	7512 DR. PHILLIPS BLVD, SUITE 50-208		\tag{\tag{\tag{\tag{\tag{\tag{\tag{	
	ORLANDO	Florida		
	(City)	(Zip code)		
designated in this of further agree to co	nt's acceptance: If a registered agent and to accept service Application, I hereby accept the appointment I mply with the provisions of all statutes rela I miliar with and accept the obligations of n	nt as registered agent and agree to itive to the proper and complete pe	act in this cap	acity. I
	Alway (Registered age	Art. nt's signature)		

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 business addresses of officers and/or directors:

	DI:	DЕ	CTO	De	
Α	131	K H		IK.	

Chairman	NAREN THOTA	
Address:	2605 SAGEBRUSH DR, SUITE 207, FLOWER MOUND, TX 75028	
Vice Chai	rman: SUSAN BEHN	
Address:	2605 SAGEBRUSH DR, SUITE 207, FLOWER MOUND, TX 75028	
Director:	SUNIL VADDADI	
Address:	2605 SAGEBRUSH DR, SUITE 207. FLOWER MOUND. TX 75028	
Director:	PRASANNA THOTA	
Address:	2605 SAGEBRUSH DR, SUITE 207, FLOWER MOUND, TX 75028	<u> </u>
B. OFFI	CERS NAREN THOTA	SEP 28
	2605 SAGEBRUSH DR, SUITE 207, FLOWER MOUND, TX 75028	F S IA
4 1 1	SUSAN BEHN dent: 2605 SAGEBRUSH DR, SUITE 207, FLOWER MOUND, TX 75028	<u> </u>
Secretary:	PRASANNA THOTA	
Address:	2605 SAGEBRUSH DR, SUITE 207, FLOWER MOUND, TX 75028	
Treasurer:	PRASANNA THOTA	
Address:	2605 SAGEBRUSH DR. SUITE 207. FLOWER MOUND, TX 75028	
NOTE: 1	If necessary, you may which an iddendum to the application listing additional offic	eers and/or directors.
The office are true as a third de	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms and that he or she is aware that false information submitted in a document to the Degree felony as provided for in s.817.155, F.S. EN THOTA	

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



## Office of the Secretary of State

### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for INFOSEMANTICS, INC. (file number 162907900), a Domestic For-Profit Corporation, was filed in this office on May 22, 2001.

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 September 23, 2015.



Phone: (512) 463-5555

Prepared by: Deborah Rogers

Carlos H. Cascos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 631902830002