

M1700001002

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LOCKE LORD LLP
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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Foreign Limited Liability Company
INOVEZ LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

2017 FEB -3 AM 11:27

LOCKE LORD EDWARDS
TALLAHASSEE, FLORIDA

17 FEB -3 AM 9:00

FILED

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**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:

1. INOVEZ 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. DELAWARE

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

3. 81-4652326

(FEI number, if applicable)

4. Upon filing

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

5. 6253 NW 23RD ROADBOCA RATON FL 33434

(Street Address of Principal Office)

6. 6253 NW 23RD ROADBOCA RATON FL 33434

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Rajendra KulkarniOffice Address: 6253 NW 23RD ROADBoca RatonFlorida 33434

(City)

(Zip code)

Registered agent's acceptance:

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 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.

Rajendra Kulkarni (Registered agent's signature)

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

Rajendra Kulkarni - Manager, c/o Inovez LLC, 6253 NW 23rd Road, Boca Raton FL 33434Scott Fogarty - Manager, c/o Inovez LLC, 6253 NW 23rd Road, Boca Raton FL 33434Suren Kulkarni - Manager, c/o Inovez LLC, 6253 NW 23rd Road, Boca Raton FL 33434

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Rajendra Kulkarni (signature of authorized person)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

RAJENDRA KULKARNI, MANAGER

Typed or printed name of signer

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "INOVEZ LLC" IS DULY FORMED UNDER THE
LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE SECOND DAY OF NOVEMBER, A.D. 2016.



6201673 8300

SR# 20166470350

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203272279

Date: 11-02-16

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February 3, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LOCKE LORD LLP

SUBJECT: INOVEZ LLC
REF: W17000010012

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

If you have any further questions concerning your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II
Registration Section

FAX Aud. #: H17000031745
Letter Number: 917A00002227

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