P13000102037

,			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
•			
PICK-UP WAIT MAIL			
•			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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SECRETABLE PROBLEM

COVER LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: Domestication of Srinivasa Sai Inc

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75 Total to domesticate and file \$128.75

OPTIONAL:

Certificate of Status

\$ 8.75

Srinivasa Sai Inc

Name (printed or typed)

3047 NW 91st Ave,

Address

Coral Springs, FL-33065

City, State & Zip

5632090150

Daytime Telephone Number

ayalavarapu@yahoo.com

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

To,

Date 12/26/2013

Diane Cushing,

Senior Section Administrator,

o/o The Florida Secretary of State

Division of Corporations

From:

Srinivasa Sai Inc,

Krishna S AYalavarapu

3047,NW 91st Ave, Apt 205,

Coral Springs,FL 33065

Subject: Reference Letter 813A00028620 dated 12/17/2013

Respected Madam,

In reference to the letter sited in the subject, Please find the enclosed.

We would like to state that, We have no intention to revoke the dissolution and so kindly dissolve this corporation and release the name for Domestication.

- 1. Articles of Dissolution
- 2. Cheque for \$35
- 3. Certificate of domestication.

Please do the needful. Please call me at 563 209 0150 in case of any questions.

Thanks & Best Regards

Krišhna S Ayalavarapu

Director-Srinivasa Sai Inc



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 17, 2013

KRISHNA S AYALAVARAPU SRINIVASA SAI INC 3047 NW 91ST AVE., APT 205 CORAL SPRINGS, FL 33065

SUBJECT: SRINIVASA SAI INC Ref. Number: P13000097236

We have received your document for SRINIVASA SAI INC and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to include the fee for the dissolution. Please send an additional \$35.00. You must also send in a letter stating you have no intention of revoking the dissolution so that we can release the name for the demostication filing. You also completed the wrong form for the dissolution please complete the attached form for a corporation filing.

The registered agent must have a Florida street address. A post office box is not acceptable.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 813A00028620

CERTIFICATE OF DOMESTICATION

Th	e undersigned, Krishna S Ayalavarapu , Direc	ctor			
	(Name)	(Title)			
of	Srinivasa Sai Inc	a foreign corporation,			
in	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby certify:	r:			
1.	The date on which corporation was first formed was 07/28/200	05			
2.	The jurisdiction where the above named corporation was first for came into being was Bettendorf,lowa	rmed, incorporated, or otherwise			
3.	The name of the corporation immediately prior to the filing of this Certificate of Domestication was Srinivasa Sai Inc, 100 Chatham Park Dr, Apt 303,Pittsburgh,PA				
4.					
5.	The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was 100 chatham park dr. Apt 303, Pittsburgh,PA 15220				
6.	Attached are Florida articles of incorporation to complete the dor to s. 607.1801.	mestication requirements pursuant			
I a	m Director , of Srinivasa Sai Inc				
	d am authorized to sign this Certificate of Domestication on behalthis the 13 day of December	If of the corporation and have done , 2013			
	Affinifina	<u>.</u>			
	(Authorized Signature)	13 DEC SECRET			

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Srinivasa Sai Inc

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS Principal Address	Mailing Address
Principal Address APT 205 3047,NW 91st Ave,Coral Springs, FL 33065	Mailing Address APT こら 3047 NW 91st Ave, Coral Springs,FI 33065
ARTICLE III PURPOSE	
THE PURPOSE FOR WHICH THE CORPORATION IS ORGAN	NZED:
To provide Information technology consulting services to the	clients in the area of Enterprise Resource planning systems.
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ARTICLE IV THE NUMBER OF SH.	10000	

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS			
THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:			
Title/Name	Title/Name		
Krishna S Ayalavarapu, Director 3047, NW 91st Ave, Coral Springs, FL 33065			
3047,NW 91st Ave, Coral Springs,FL 33065			
Title/Name	Title/Name		
	MANA		
Title/Name	Title/Name		
Title/Name	Title/Name		

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEP	TABLE) OF THE REGISTERED AGENT IS:
Krishna S Ayalavarapu	
3047,NW 91st Ave, Coral Springs,FL 33065	
ADMICI E VIII INCORDORATOR	
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS:	
Krishna S Ayalavarapu	
3047,NW 91st Ave, Coral Springs,FL 33065	

STATED CORPORATION AT THE PLACE DESIGNATED IN THIS C	CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGR	<i>EE TO ACT IN THIS CAPACITY.</i> 12/13/2013
Signature/Registered Agent	Date
_ Anthriuma	12/13/2013
Signature/incorporator	Date
	TALLAH
	LED C27 MII: 05 TARY OF THE OWNER.
	No.

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS