

**F1500004706**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : VCORP SERVICES, LLC  
Account Number : 120080000067  
Phone : (845) 425-0077  
Fax Number : (845) 818-3588

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TALLAHASSEE, FLORIDA

\*\*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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15 OCT 23 AM 9:43  
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**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Aluf Biometrics, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

OCT 26 2015  
J. HARRIS

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** ALUF BIOMETRICS, INC.

*Name of corporation - must include suffix*

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Teresa McWilliams

*Name of Person*

Aluf Biometrics, Inc.

*Firm/Company*

P.O. Box 2677

*Address*

Hollywood, FL 33022

*City/State and Zip code*

t.mcwilliams@corewaferindustries.com

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

For further information concerning this matter, please call:

Teresa McWilliams

*Name of Person*

at ( 866 ) 793-1110

*Area Code & Daytime Telephone Number*

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

**1. ALUF BIOMETRICS, INC.**

*(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")*

*(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)*

**2. NEVADA**

*(State or country under the law of which it is incorporated)*

**3.**

*(FEI number, if applicable)*

**4. 10/12/2015**

*(Date of incorporation)*

**5.**

**perpetual**

*(Duration: Year corp. will cease to exist or "perpetual")*

**6. have not transacted business in Florida yet**

*(Date first transacted business in Florida, if prior to registration).  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)*

**7. 1801 Polk Street, #22677, Hollywood, FL 33022**

*(Principal office address)*

**P.O. Box 2677, Hollywood, FL 33022**

*(Current mailing address)*

**8. Operations and corporate headquarters being established in Florida**

*(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)*

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: Vcorp Services, LLC

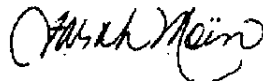
Office Address: 5011 South State Road 7, Suite 106

Davie, Florida 33314  
*(City) (Zip code)*

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**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation 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.*



*(Registered agent's signature)*

11. 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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Dale C. Bennett, Advisor

Address: P.O. Box 22677

Hollywood, FL 33022

Director: Teresa McWilliams

Address: P.O. Box 22677

Hollywood, FL 33022

B. OFFICERS

President: Teresa McWilliams

Address: P.O. Box 22677

Hollywood, FL 33022

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Teresa McWilliams


Address: P.O. Box 22677, Hollywood, FL 33022

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. Teresa McWilliams, President  
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



**CERTIFICATE OF EXISTENCE  
WITH STATUS IN GOOD STANDING**

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ALUF BIOMETRICS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 12, 2015, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 16, 2015.

Handwritten signature of Barbara K. Cegavske in cursive script.

BARBARA K. CEGAVSKE  
Secretary of State



Electronic Certificate  
Certificate Number: C20151016-1565  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>