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CONTACT PERSON: Norma Parramore -- EXT# 1147

EXAMINER:



TO: Registration Section Division of Corporations OBT GLOBAL INC. SUBJECT: (Name of corporation - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business and Flor "Certificate of Existence", and check are submitted to register the above referenced foreigh coj to transact business in Florida. Please return all correspondence concerning this matter to the following: Kelvin K. Chung (Name of Person) Jones Day (Firm/Company) 2882 Sand Hill Road, Suite 240 (Address) Menlo Park, CA 94025 (City/State and Zip code) For further information concerning this matter, please call: at (650 ) 739-3969 Kelvin K. Chung (Area Code & Daytime Telephone Number) (Name of Person) STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: □ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy

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### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA	A STATUTES THE EQUIOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSAC	
1. OBT GLOBAL INC.	Fig. 2
(Name of corporation; must include the word "INCORPOR words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	early indicate that it is a corporation instead of a
2. Delaware	3. EIN 33-1042830
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. February 6, 2003	5. Perpetual
(Date of incorporation)	(Duration: Year corp. will cease to exist or, "perpetual")
6. Upon Qualification	
(Date first transacted business in Florida. If corporation has	not transacted business in Florida, insert "upon qualification.") 501, 607.1502 and 817.155, F.S.)
712550 Biscayne Blvd., Suite 51	1, North Miami, FL 33181 夏市 万
(Principal office	address)
same as above	
(Current mailing: To transact in any lawful act or may be organized under the Gener 8. permitted under the Florida Stat (Purpose(s) of corporation authorized in home state o	al Corporation Law of Delaware and as utes.
<ol><li>Name and <u>street address</u> of Florida registered ager</li></ol>	nt: (P.O. Box or Mail Drop Box NOT acceptable)
Name: <u>Corporation Service Company</u>	
Office Address: 1201 Hays Street	<del></del>
Tallahassee (City)	, Florida <u>32301</u> (Zip code)
designated in this application, I hereby accept the appoint	ervice of process for the above stated corporation at the place intment as registered agent and agree to act in this capacity. It is relative to the proper and complete performance of my is of my position as registered agent.
Corporation Service Company	Vivenshipper
(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:	THE THE
A. DIRECTORS	SECRETARIAN SECRETARIAN SECRETARIAN IN PROPERTY OF THE PROPERT
Chairman: See attached officers/directors rider	
Address:	45 P
	DE O
Vice Chairman:	
Address:	500 OS
	FEB T
Director:	S. F.M
	デニュ <b>フ</b>
Address:	SE B
	<b>→</b> • • • • • • • • • • • • • • • • • • •
Director:	•
Address:	
B. OFFICERS	
President: See attached officers/directors rider	· · · · · · · · · · · · · · · · · · ·
Address:	<u> </u>
Vice President:	
Address:	
	· · · · · · · · · · · · · · · · ·
Secretary:	
Address:	
Treasurer:	
	7 <del>-</del> 7- 7- 7- 7- 7- 7- 7- 7- 7- 7- 7- 7- 7-
Address:	
NOTE: If necessary, you may attach an addengum to the application listing add	litional officers and/or directors.
13.	
(Signature of Chairman, Vice Chairman, or any officer listed in	number 12 of the application)
14. HARI RAD PRESIDENT	
(Typed or printed name and capacity of person signing a	application)

#### **OBT GLOBAL INC.**

#### Officers and Directors Rider

Name and Address	Title F
Vidhan Chaudhari c/o OBT Global Inc. 1812 Front Street Scotch Plains, NJ 07076	Chairman of the Board
Hari Rao c/o OBT Global Inc. 1812 Front Street Scotch Plains, NJ 07076	Chief Executive Officer
Hari Rao c/o OBT Global Inc. 1812 Front Street Scotch Plains, NJ 07076	President
Ramesh Kodali c/o OBT Global Inc. 1812 Front Street Scotch Plains, NJ 07076	Vice President
Christopher Graham c/o OBT Global Inc. 1812 Front Street Scotch Plains, NJ 07076	Vice President
Hari Rao c/o OBT Global Inc. 1812 Front Street Scotch Plains, NJ 07076	Treasurer
Hari Rao c/o OBT Global Inc. 1812 Front Street Scotch Plains, NJ 07076	Secretary

## Delaware

#### The First State



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OBT GLOBAL INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF FEBRUARY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OBT GLOBAL INC." WAS INCORPORATED ON THE SIXTH DAY OF FEBRUARY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED

03 FEB IT PN 2: 16

SECRETARY OF STATE
AND ANASSEE FLORIDA



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Warriet Smith Windson Secretary of State

AUTHENTICATION: 2253596

030089390 DATE: 02-11-03