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SECRETARY OF STATE

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#### **COVER LETTER**

то:	Registration Section Division of Corporations
AT.W.	KENNEDY INTERNATIONAL SOFTWARE INC.
SORT	Name of corporation - must include suffix
Dear S	ir or Madam:
The er	closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," ficate of Existence," or "Certificate of Good Standing" and check are submitted to register the referenced foreign corporation to transact business in Florida.
	return all correspondence concerning this matter to the following:  A CERQUA
	Name of Person
PORT	E BROWN LLC
	Firm/Company
845 O/	AKTON STREET
ELK G	Address ROVE VILLAGE, IL 60007
	City/State and Zip code
lcerqua	@portebrown.com
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
LINDA	CERQUA 847 956-1040 at ( )
	Name of Person Area Code Daytime Telephone Number
Enclos	STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  ed is a check for the following amount:  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314
	.00 Filing Fee \$ \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee,  Certificate of Status Certified Copy 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.

	Corp," "Inc," "Co," or "Corp.")			
•	able in Florida, enter alternate corporate name	• • •	ing business in Florida)	
NEW JERSEY	3.	3		
(State or country under the law of which it is incorporated) 06/02/2000		(FEI number, if applicable)  (Date of duration, if other than perpetual)		
•	of incorporation)	(Date of duration, if other	er than perpetual)	
REGISTRATIO	ON DATE			
0701 CORPOR	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 ATE DRIVE SUITE 354 STAFFORD, TX 7	02, F.S., to determine penalty liabi	ility)	
	(Princip	al office address)		
	(Current mailir	g address, if different)		
Name and stree	et address of Florida registered agent: (P.C	). Box <u>NOT</u> acceptable)	205	
Name:	BUSINESS FILINGS INCORPORATED			
ice Address:	1200 SOUTH PINE ISLAND ROAD	·	IB /	
	PLANTATION,	33324 , Florida	FES A	
	(City)	(Zip code)	PRE 2	
			<b>X0</b>	
Designational per	undia aagamtammat			
	ent's acceptance: led as registered agent and to accept servi	ce of process for the above stat,	at the plant	
ving been nam ignated in this ther agree to c		nent as registered agent and ag elative to the proper and compl	re la grapacio	

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:

A. DIRECT	ORS			
Chairman:				
Address:				
/ice Chairman	n:			
\ddress:		<del></del>	<del></del> -	<del></del>
 Director:				
tourcas				
Director:				
<del></del>		) )	2016	
B. OFFICE	RS	22 24 32 24	SEP	T
	RENDER MUDHUSANI	ASS.	- G	Burganan
1070	01 CORPORATE DRIVE SUITE 354	: " Q	 >	1
Address: STA	AFFORD, TX 77477	ORIDE	Ģ	
ice President:	:	Dr.	<u>,0</u>	
suaress.				<del></del>
ecretary:			·	
ddress:				
reasurer:				
Address:				
OTE: If ne	cessary, you may attach an addendum to the application listing additional	officers and/	or dire	clors
2	H.P.		. 6	
The officer or re true and the	Signature of Director or Officer of director signing this document (and who is listed in number 11 above) affined hat he or she is aware that false information submitted in a document to the felony as provided for in s.817.155, F.S.			
3. NAREND	DER MUDHUSANI/PRESIDEN			
	(Typed or printed name and capacity of person signing applicati	ion)		

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES

#### KENNEDY INTERNATIONAL SOFTWARE, INC.

0100818980

### With the Previous or Alternate Name KENEDY INTERNATIONAL SOFTWARE INC. (Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on June 2, 2000.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Business Filings Incorporated 820 Bear Tavern Road West Trenton, NJ 08628

I further certify that as of the date of this certificate, the following amendments and changes are on file in this office:

Name Change	12/20/2004
Amendment	09/23/2005
Revoked For Failure To Pay Annual Reports	10/04/2005
Change Of Agent And Office	06/09/2008
Reinstatement Process Pending	06/09/2008
Reinstated (Annual Reports)	08/11/2009
Change Of Agent And Office	05/27/2010
Annual Report Filing With Officer/Member Change	05/15/2014
Change Of Registered Agent	09/01/2015

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES

#### KENNEDY INTERNATIONAL SOFTWARE, INC.

0100818980



Certification# 137235535

Verify this certificate at https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 10th day of September, 2015

Robert a. Romano

Robert A Romano

Acting State Treasurer