

## THE UNITED STATES OF AMERICA

## I-797A | NOTICE OF ACTION

DEPARTMENT OF HOMELAND SECURITY  
U.S. CITIZENSHIP AND IMMIGRATION SERVICES

Receipt Number IOE8613983931	Case Type I129 - PETITION FOR A NONIMMIGRANT WORKER
Received Date 01/23/2023	Priority Date Petitioner HCL AMERICA INC
Notice Date 03/07/2023	Page 1 of 2 Beneficiary GONABOYINA, NAGA VENKATA SOMESWARA RAO

HCL AMERICA INC  
c/o JACK HEH HANIMIREDDY VENKATREDDY INA  
LIAKHAVETS SHRUTI CHOWDHARY SR EXECUTIVE FUNCTION  
C  
330 POTRERO AVENUE  
SUNNYVALE CA 94085

Notice Type: Approval Notice  
Class: H1B  
Valid from 01/23/2023 to 11/20/2024

The above petition and accompanying request for an extension of stay have been approved. The status of the named beneficiary(ies) in this classification is valid as indicated on the I-94 attached below. The beneficiary(ies) can work for the petitioner pursuant to this approval notice, but only as detailed in the petition and during the petition validity period indicated above, unless otherwise authorized by law. Changes in employment or training may require you to file a new Form I-129, Petition for a Nonimmigrant Worker.

The dates in the I-94 attached below might not be for the same dates as the petition validity dates above because the I-94 below may contain a grace period of up to 10 days before and up to 10 days after the petition validity period for the following classifications: CW-1, E-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-1S, P-2, P-2S, P-3, P-3S, TN-1, and TN-2. An I-94 for H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. However, the beneficiary(ies) may not work during such grace periods, unless otherwise authorized by law. The decision to grant a grace period and the length of the granted grace period is discretionary, final, and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.

The petitioner should keep the upper portion of this notice. The lower portion should be given to the beneficiary(ies). The beneficiary(ies) should keep the right part (the I-94 portion) with his or her other Forms I-94, Arrival-Departure Record. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted a extension of stay who leaves the U.S. and is not visa-exempt must normally obtain a new visa before returning. The left part can be used when applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry based on this approval notice at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, Application for Action on an Approved Application or Petition, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.

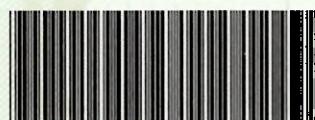
The approval of this petition does not guarantee that the beneficiary(ies) will be found to be eligible for a visa, for admission to the United States (if traveling abroad and seeking re-admission), or for a subsequent extension of stay, change of status, or adjustment of status.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to <https://www.uscis.gov/file-online>.

California Service Center  
U.S. CITIZENSHIP & IMMIGRATION SVC  
P.O. Box 30111  
Laguna Niguel CA 92607-0111

USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)



PLEASE TEAR OFF FORM I-94 PRINTED BELOW AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

Detach This Half for Personal Records

Receipt# IOE8613983931

I-94# 747327397 A2

NAME GONABOYINA, NAGA VENKATA SOMESWARA

RAO

CLASS H1B

VALID FROM 01/23/2023 UNTIL 11/20/2024

PETITIONER

HCL AMERICA INC

330 POTRERO AVENUE

SUNNYVALE CA 94085

747327397 A2

Receipt Number IOE8613983931

US Citizenship and Immigration Services

I94 Departure Record

Petitioner: HCL AMERICA INC

14. Family Name

GONABOYINA

15. First (Given) Name

NAGA VENKATA

SOMESWARA RAO

16. Date of Birth

06/10/1993

17. Country of Citizenship

India

## **ADDITIONAL INFORMATION FOR APPLICANT/PETITIONER**

If this is an approval notice for Form I-102, Application For Initial/Replacement I-94, save the upper portion of this I-797A, Notice of Action, for your records. If this is an approval notice for Form I-129, Petition for a Nonimmigrant Worker, the petitioner should keep the upper part of this I-797A.

Please note that simply filing an application, petition or request, or having an approved petition does not give the person it was filed for (also known as the beneficiary) permission to legally enter the United States. It also does not grant any legal immigration status.

### **Include a copy of this notice if you:**

- Write to USCIS or a U.S. Consulate about your case or
- File another application or petition with USCIS based on this decision.

USCIS will notify you separately about any other application or petition you have filed.

### **Inquiries**

If you have questions about your application or petition, you may:

- Go to <https://egov.uscis.gov/casestatus> to check your case status online.
- Call the USCIS Contact Center at 1-800-375-5283.
- Telecommunications Device for the Deaf (TDD) 1-800-767-1833.
- Send us a letter and include a copy of this notice.
- Schedule an appointment at a local USCIS office using InfoPass at <https://infopass.uscis.gov>.

If you filed Form I-907, Request for Premium Processing Service, and you have any questions about the decision or status of your application or petition, please follow the instructions for contacting the Premium Processing Unit printed on the receipt notice we mailed you.

### **APPROVAL OF NONIMMIGRANT PETITION**

If we approved a nonimmigrant petition, it means that the beneficiary is eligible for the requested nonimmigrant classification. If this notice says that we are notifying a U.S. Consulate about the approval for the purpose of issuing a visa, contact the appropriate U.S. Consulate directly if you or the beneficiary has questions about the process. For more information about USCIS processing after a petition is approved, see the instructions on the form you filed.

### **FORM I-94 ATTACHMENT**

You can find your replacement Form I-94 (Arrival/Departure Record) in the lower portion on the front side of this notice. Keep the right half of your replacement Form I-94 with your passport, along with a copy of your original I-94 if you have it. Keep the left half of your replacement Form I-94 in a safe place with your personal records. Submit a copy of your replacement Form I-94 with any future application or petition.

When you leave the United States, you must turn in the right half of your I-94 (kept in your passport) to the officials at the airport, border or seaport. If you do not do so, it may delay your entry into the United States in the future. You may stay in the United States only until the date indicated on this form. If you want to remain in the United States past this date, you will need further authorization from USCIS.

If you are a student planning to reenter the United States within 30 days to return to the same school, review the "Instructions to Students" on Page 3 of Form I-20 before surrendering your replacement I-94.

If you lose the right half of your replacement Form I-94 (kept in your passport), submit a copy of the left half of the Form I-94 (that you keep with your personal records), along with a new Form I-102, to apply for a new replacement I-94.

**Warning:** If you accept employment without our authorization, you may be subject to removal or deportation.

# THE UNITED STATES OF AMERICA

## I-797A | NOTICE OF ACTION

DEPARTMENT OF HOMELAND SECURITY  
U.S. CITIZENSHIP AND IMMIGRATION SERVICES

Receipt Number IOE8613983931		Case Type I129 - PETITION FOR A NONIMMIGRANT WORKER
Received Date 01/23/2023	Priority Date	Petitioner HCL AMERICA INC
Notice Date 03/07/2023	Page 2 of 2	Beneficiary GONABOYINA, NAGA VENKATA SOMESWARA RAO

**THIS NOTICE IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-205-2417 or fax 202-481-5719.

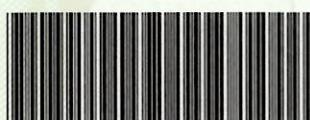
**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

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**INTENTIONALLY LEFT BLANK**  
Detach This Part for Personal Records  
  
 Receipt# **INTENTIONALLY LEFT BLANK**  
 I-94# **INTENTIONALLY LEFT BLANK**  
 US Citizenship and Immigration Services  
 CLASS **INTENTIONALLY LEFT BLANK**  
 VANDERBILT UNIVERSITY **INTENTIONALLY LEFT BLANK**  
 PINEHURST **INTENTIONALLY LEFT BLANK**  
**INTENTIONALLY LEFT BLANK**

**INTENTIONALLY LEFT BLANK**  
 Receipt# **INTENTIONALLY LEFT BLANK**  
 US Citizenship and Immigration Services  
 INTENTIONALLY LEFT BLANK  
 I-94 Departure Record **INTENTIONALLY LEFT BLANK**  
 Petitioner **INTENTIONALLY LEFT BLANK**  
 14. Family Name **INTENTIONALLY LEFT BLANK**  
 15. First (Given) Name **INTENTIONALLY LEFT BLANK** 16. Date of Birth **INTENTIONALLY LEFT BLANK**  
 17. Country of Citizenship **INTENTIONALLY LEFT BLANK**

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- File another application or petition with USCIS based on this decision.

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If you are a student planning to reenter the United States within 30 days to return to the same school, review the "Instructions to Students" on Page 3 of Form I-20 before surrendering your replacement I-94.

If you lose the right half of your replacement Form I-94 (kept in your passport), submit a copy of the left half of the Form I-94 (that you keep with your personal records), along with a new Form I-102, to apply for a new replacement I-94.

**Warning:** If you accept employment without our authorization, you may be subject to removal or deportation.

**OFFICIAL RECORD**  
**Date: 04/03/2023**  
**Rec#: 376951**

Department of Health • Vital Statistics

(STATE FILE NUMBER)

**STATE OF FLORIDA  
MARRIAGE RECORD**

TYPE IN UPPER CASE  
USE BLACK INK

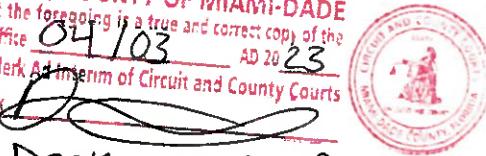
This license not valid unless seal of Clerk,  
Circuit or County Court, appears thereon.



2023-005574

APPLICATION NUMBER

**STATE OF FLORIDA, COUNTY OF MIAMI-DADE**  
 I HEREBY CERTIFY that the foregoing is a true and correct copy of the  
 original on file in this office 04/03 AD 2023  
 LUIS G. MONTALDO, Clerk Ad Interim of Circuit and County Courts  
 Deputy Clerk



Dava Milson



**APPLICATION TO MARRY**

1. NAME OF SPOUSE (First, Middle, Last) NAGA VENKATA SOMESWARA RAO (NMN) GONABOYINA		1b. MAIDEN SURNAME (If applicable)	2. DATE OF BIRTH (Month, Day, Year) JUN-10-1993
3a. RESIDENCE - CITY, TOWN, OR LOCATION MIAMI	3b. COUNTY MIAMI DADE	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) INDIA
5. NAME OF SPOUSE (First, Middle, Last) PURNA DIVYA (NMN) THURAGA		5b. MAIDEN SURNAME (If applicable)	6. DATE OF BIRTH (Month, Day, Year) AUG-27-1987
7a. RESIDENCE - CITY, TOWN, OR LOCATION MIAMI	7b. COUNTY MIAMI DADE	7c. STATE FLORIDA	8. BIRTHPLACE (State or Foreign Country) INDIA

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY



9. SIGNATURE OF SPOUSE (Sign full name using black ink) ► <u>G. Someswar Rao</u>	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) MAR-23-2023
11. TITLE OF OFFICIAL DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use black ink) ► <u>Luis G. Montaldo</u>
13. SIGNATURE OF SPOUSE (Sign full name using black ink) ► <u>T. Purna Divya</u>	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) MAR-23-2023
15. TITLE OF OFFICIAL DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use black ink) ► <u>D. E.</u>

**LICENSE TO MARRY**

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE MIAMI-DADE	18. DATE LICENSE ISSUED MAR-23-2023	19. EXPIRATION DATE MAR-26-2023	20. BY D.C. D. E.
20a. SIGNATURE OF COURT CLERK OR JUDGE ► <u>Luis G. Montaldo</u>	20b. TITLE CLERK AD INTERIM		

**CERTIFICATE OF MARRIAGE**

I HEREBY CERTIFY THAT THE ABOVE NAMED SPOUSES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA

21. DATE OF MARRIAGE APR 03 2023	22. CITY, TOWN, OR LOCATION OF MARRIAGE HAILEAH BRANCH COURT
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23a. SIGNATURE OF PERSON PERFORMING THE CEREMONY (Use black ink) ► <u>Dava Milson</u>	23c. ADDRESS (of person performing ceremony) 11 EAST 60 ST., HAILEAH, FL 33130
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23b. NAME AND TITLE OF PERSON PERFORMING THE CEREMONY (Or notary stamp) <b>Dava Milson</b>	24. SIGNATURE OF WITNESS TO CEREMONY ►
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25. SIGNATURE OF WITNESS TO CEREMONY ►
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**INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED**

26. SOCIAL SECURITY NUMBER 657-42-4170	27. RACE	28. WERE YOU EVER PREVIOUSLY MARRIED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	IF ANSWER IS 'YES' TO ITEM 28, THEN COMPLETE ITEMS 29a, 29b, and 29c		
29. NO. OF THIS MARRIAGE 1	29b. LAST MARRIAGE ENDED BY (Death, Divorce, or Annulment)	29c. DATE LAST MARRIAGE ENDED			
30. SOCIAL SECURITY NUMBER 674-69-9689	31. RACE	32. WERE YOU EVER PREVIOUSLY MARRIED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	IF ANSWER IS 'YES' TO ITEM 32, THEN COMPLETE ITEMS 33a, 33b, and 33c		
33a. NO. OF THIS MARRIAGE 1	33b. LAST MARRIAGE ENDED BY (Death, Divorce, or Annulment)	33c. DATE LAST MARRIAGE ENDED			