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Florida Department of State
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Fax Number : (850)295-0383

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From: Account Name : TRIPP SCOTT, P.A.
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FOREIGN PROFIT QUALIFICATION

Sharrell, Inc.

Certificate of Status	0
Certified Copy	1
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANACT BUSINESS IN THE STATE OF FLORIDA.

1. **SHARRELL, 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. **GEORGIA**

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

3. **20-1055126**

(FEI number, if applicable)

4. **4/02/2004**

(Date of incorporation)

5. **PERPETUAL**

(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.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. **131 BOULDER COVE, MACON, GA 31220**

(Principal office address)

(SAME AS ABOVE)

(Current mailing address)

8. **PURCHASE AND SALE OF REAL ESTATE, AND ANY OTHER LAWFUL PURPOSE**

(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 or Mail Drop Box **NOT** acceptable)

Name: **TRIPP SCOTT, P.A.**

Office Address: **110 SE 6TH STREET, 15TH FLOOR**

FORT LAUDERDALE

(City)

, Florida **33301**

(Zip code)

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.

TRIPP SCOTT, P.A.

By: 

(Registered agent's signature) **Tanya L. Bower, Esq. (For the Firm)**

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:

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A. DIRECTORS

Chairman: **ROBERT E. LUTTRELL, JR.**

Address: **131 BOULDER COVE**

MACON, GA 31220

Vice Chairman:

Address:

Director: **TIMOTHY D. SHARPE**

Address: **108 BRANTLEY RIDGE**

WARNER ROBINS, GA 31088

Director:

Address:

B. OFFICERS

President: **ROBERT E. LUTTRELL, JR.**

Address: **131 BOULDER COVE**

MACON, GA 31220

Vice President:

Address:

Secretary: **TIMOTHY D. SHARPE**

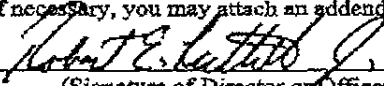
Address: **108 BRANTLEY RIDGE, WARNER ROBINS, GA 31088**

Treasurer: **TIMOTHY D. SHARPE**

Address: **108 BRANTLEY RIDGE, WARNER ROBINS, GA 31088**

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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 listed in number 12 of the application)

14. **ROBERT E. LUTTRELL, JR., DIRECTOR (CHAIRMAN)**
(Typed or printed name and capacity of person signing application)

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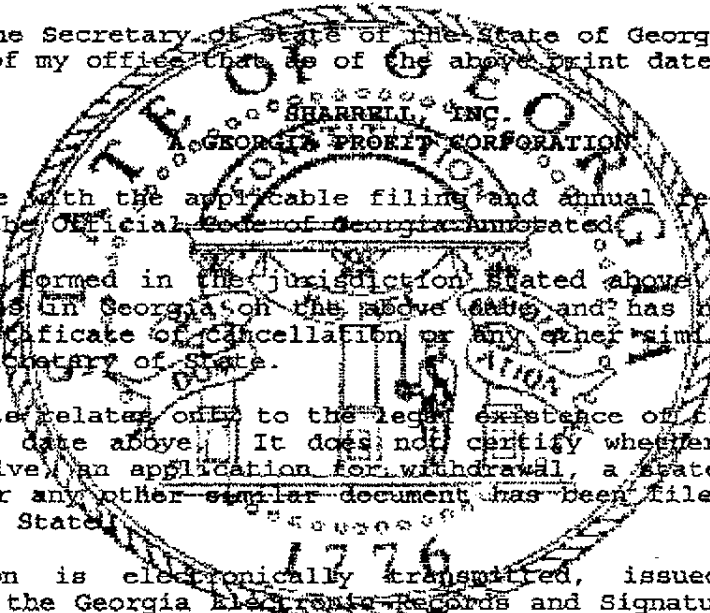
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Corporations Division
315 West Tower
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FORM NUMBER : 211

HERBERT L. WELLS & ASSOCIATES
HERBERT WELLS
813 CARROLL STREET
PERRY, GA 31069

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date



SHARRELL, INC.
GEORGIA PROFIT CORPORATION
is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date, and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Cathy Cox
Cathy Cox
Secretary of State

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