## F05000005456

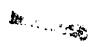
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(***)
PICK-UP WAIT MAIL
(Business Entity Name)
FOS-511510
-10009
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
M. TOO
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Office Use Only



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OS SEP 14 PM 3: 23

## **COVER LETTER**

TO:	Registration So Division of Co			
SUBJECT: Shah		Shah	Associates, Inc.	
	<del></del>	(Name of cor	poration - must include suffix	)
Dear S	Sir or Madam:			
"Certi		ce," and check are submitt	on for Authorization to Transfed to register the above refere	
Please	return all corres	pondence concerning this	matter to the following:	
		S. K	. Shah	
	<del></del>	(Na	une of Person)	······································
		Shah	& Associates, Inc.	
		(Fi	m/Company)	<del> </del>
		416 1	North Frederick Avenu	e
			(Address)	······································
		Gaith	nersburg, MD 20877	
	<del></del> _	(Cfty/	State and Zip code)	<del></del>
		concerning this matter, p		
S	. K. Shah	at (	301 926-2797	<del></del>
	(Name of Pers	son) (	Area Code & Daytime Telepi	none Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	0.00 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.

(If name unavailable in Florida, enter alternate corporate m	ame adopted for the purpose of transacting busines	ss in Florie	da)
· · · · · · · · · · · · · · · · · · ·			- /
MD State or country under the law of which it is incorporated)	(FEI number, if applicable)		—
	5. perpetual (Duration: Year corp. will cease to exist or	"perpetual	i")
Upon qualification (Date first transacted business			
	ess in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		
416 North Frederick Avenue, Gai		<del></del>	
` '	•		
416 North Frederick Avenue, Gai			
(Current mailing	address)		
Engineering Services		Si	05
(Purpose(s) of corporation authorized in home state of	or country to be carried out in state of Florida)	A:	SEP
Name and street address of Florida registered agent:	(P.O. Box NOT acceptable)	# 17 AS	=
	_ `	SEE	+ PH
Name: CT Corporation !  Tice Address: 1200 South Pine Isl	401	E	تگذ (د)
fice Address: 1000 South Pine 19	and Kd.	용된	<i>\infty</i>
Plantation	Florida 33324 (Zip code)	Dr.	ယ
(City)	(Zip code)		
. Registered agent's acceptance:			
. Registered agent's acceptance: iving been named as registered agent and to accept s	ervice of process for the above stated corpore	ation at ti	he pli
signated in this application, I hereby accept the appo other agree to comply with the provisions of all statut d I am familiar with and accept the obligations of my	tes relative to the proper and complete perfor		
	Mark S. Eppley Assistant Vice-President		

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. DIRECTO					
Chairman:	S. K. Shah				
	416 North Frederick Avenue				
	Gaithersburg, MD 20877				
Vice Chairman:					
Director:					
B. OFFICERS					
	S. K. Shah				
	416 North Frederick Avenue				
	Gaithersburg, MD 20877				
Vice President:					
Secretary:	S. K. Shah				
	416 North Frederick Avenue, Gaithersburg, MD 20877				
Treasurer:	S. K. Shah				
	416 North Frederick Avenue, Gaithersburg, MD 20877				
NOTE: If nece	ssary, 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)				
• •	C V Chali Durahlank				
14	S. K. Shah, President (Typed or printed name and capacity of person signing application)				

## STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT SHAH & ASSOCIATES, INCORPORATED IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS SEPTEMBER 13, 2005.

Paul B. Anderson Charter Division

Paul B. Under



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

crbink