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FOREIGN PROFIT/NONPROFIT CORPORATION

Eduwizards Inc.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
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4/16/2015 APR-16-2015 16:03

Fax Audit: H150000940323 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.

| Eduwizards Inc | c. | | | |
|--|--|---|--|--------|
| (Enter name of | corporation: must include "INCORPORATE. Corp." "Inc." "Co." or "Corp.") | D." "COMPANY." "CORPORATION." | | |
| (If name unavai | lable in Florida, enter alternate corporate nan | ne adopted for the purpose of transacting busines | s in Florida) | |
| Delaware | | 3. 27-2868613 | | |
| (State or country 6/16/2010 | under the law of which it is incorporated) | (FEI number, if applicable) Perpetual 5. | | |
| (Dat Upon Qualific | e of incorporation) ation | (Duration: Year corp. will cease to exist or | "perpetual") | |
| | | s in Florida, if prior to registration) .1502, F.S., to determine penalty liability) | | |
| 1 | (Principal office a ve, Dumont, New Jersey 07628 | ddress) | | |
| All lawful busin | (Current mailing a | ddress) | | |
| | | country to be carried out in state of Florida) | | |
| _ | eet address of Florida registered agent: (1 | | DIVISION 15 APR | 1 |
| Name: | Business Filings Incorporated | | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | } { |
| Office Address: | 515 E. Park Avenue | | f cor | |
| | Tallahassee | . Florida ³²³⁰¹ | OF STATION ORPORATION 32 | C |
| | (City) | (Zip code) | 411 ATTOM 32 | |
| Having been nar designated in thi further agree to | s application, I hereby accept the appoi | | ration at the place t in this capacity. | |
| _ | (Registered agent) | s signatue) | | |

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.

Fax Audit: H150000940323

12. Names and business addresses of officers and/or directors:

| A. DIRECTORS | | |
|--|----------------------|---|
| Chairman: | | |
| Address: | | |
| | | |
| Vice Chainnau: | | |
| Address: | | |
| | | |
| Director: Shailendra Chainaní | | |
| Address: 48 Huntting Drive, Dumont, New Jersey 07628 | | |
| | _ -5 | <u> </u> |
| Director: | Ap | SION |
| Address: | <u>~</u> | 육출도 |
| | <u> </u> | 12 A 20 A |
| B. OFFICERS | ë | STA ORAI |
| President: Shailendra Chainani | 32 | |
| Address: 48 Huntting Drive, Dumont, New Jersey 07628 | | |
| | | . |
| Vice President: Shailendra Chainani | | |
| Address: 48 Huntting Drive, Dumont, New Jersey 07628 | | |
| Secretary: Shailendra Chainani | | |
| Address: 48 Huntting Drive, Dumont, New Jersey 07628 | | |
| Address: Treasmer: Shailendra Chainaní | - | |
| | | |
| Address: 48 Huntting Drive, Dumont, New Jersey 07628 | | <u> </u> |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or dis | rectors. | • |
| 13. Shailendea Chaine | | |
| Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the fact are true and that he or she is aware that false information submitted in a document to the Department of S a third degree felony as provided for in s.817.155, F.S. | s stated State co | l herein ustitutes |
| Shailendra Chainani, President | | |
| (Typed or printed name and capacity of person signing application) | | |

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "EDUWIZARDS 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 FIFTEENTH DAY OF APRIL,
A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

SECRETARY OF STAIL DIVISION OF CORPORALION

4837090 8300

150511803

You may verify this certificate online at corp. delaware. gov/authver. shtml

Jefrey W. Bullock, Secretary of State
AUTHENTICATION: 2291305

DATE: 04-15-15

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