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TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: Sword Comp-Soft Corp.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARK COHEN 900003464939--3
(Name of Person) -11/15/00--01104--001
*****70.00 *****70.00

MARK COHEN C.P.A.
(Firm/Company)

1772 East Trafalgar Circle
(Address)

Hollywood, FL 33020
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

MARK COHEN C.P.A. at (954) 922-6042
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE
FLORIDA

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Enclosed is a check for the following amount:

- ☒ \$70.00 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.*

1. Sword Comp-Soft Corp.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DELAWARE 3. 98-0229951
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/02/98 5. Perpetual
(Date of incorporation) (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. a. 1221 Brickell Ave, 9TH FLOOR MIAMI FL 33131
(Principal office address)
- b. 1221 Brickell Ave, 9TH FLOOR MIAMI FL 33131
(Current mailing address)
8. Accounting and Recordkeeping
(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: MARK COHEN C.P.A.
Office Address: 1772 East Trafalgar Circle
Hollywood, Florida 33020
(Zip code)

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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.

[Signature]
(Registered agent's signature)

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. DIRECTORS

Chairman: _____

Address: 4055 Ste. CATHERINE Street West, Suite 133
Westmount, Quebec H3T 3J8

Vice Chairman: _____

Address: _____

Director: Mr. LEONARD STELLA

Address: 4055 Ste CATHERINE STREET WEST, SUITE 133
WESTMOUNT, QUEBEC H3T 3J8

Director: Mr. Abdulmajid Sharif

Address: 4055 STE CATHERINE STREET WEST, SUITE 133
WESTMOUNT, QUEBEC H3T 3J8

B. OFFICERS

President: Anthony Terfio

Address: 4055 Ste CATHERINE Street West, Suite 133
Westmount, Quebec H3T 3J8

Vice President: Dr. Chris Tsoukas

Address: 4055 Ste. CATHERINE Street West, Suite 133
Westmount, Quebec H3T 3J8

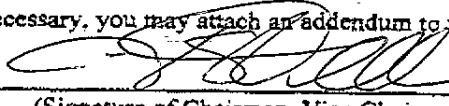
Secretary: Leonard Stella

Address: 4055 Ste. CATHERINE STREET West, Suite 133
Westmount, Quebec H3T 3J8

Treasurer: COO - LEONARD STELLA

Address: 4055 Ste. CATHERINE STREET WEST, SUITE 133
WESTMOUNT, Quebec H3T 3J8

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Mr. LEONARD STELLA - Director
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

State of Delaware
Office of the Secretary of State PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SWORD COMP-SOFT CORP." 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2000.

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TALLAHASSEE, FLORIDA





Edward J. Freel, Secretary of State

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AUTHENTICATION: 0766534

DATE: 10-31-00