0001325 5 TRANSMITTAL LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	SHZW/ SALE	ES INC	
	(Name of corp	rporation - must include suffix)	
Dear Sir or Madam:			
	e", and check are submitt	ion for Authorization to Transact Business in Florida", tted to register the above referenced foreign corporation	
Please return all corresp		s matter to the following: 50003575455- -02/12/010115006	: 06
	MARK ZIRK	(/	
	(1/3	wal-3492	
5 HZW	SALES INC	irm/Company)	
		- -	
6401 Con	gress Avenue	Suite 140 (Address)	
	1	(Address)	
	,	33487 /State and Zip code)	
For further information	concerning this matter, p	please call:	
Stephen W	, <i>y</i> ≤ø at (∑	868) 306 - 2694	
(Name of Perso	n)	(Area Code & Daytime Telephone Number) S	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	s	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for t	the following amount:	ent	
₩ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Statu		19



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 14, 2001

MARK ZIRKIND 6401 CONGRESS AVE., STE 140 BOCA RATON, FL 33487

SUBJECT: SHZW SALES INC. Ref. Number: W01000003492

We have received your document for SHZW SALES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 101A00009220

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.	SHZW SALES INC
	(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.	DELAMARE 3. 06-160000 (State or country under the law of which it is incorporated) (FEI number, if applicable)
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	Nov 28/2000 5. Perperual (Duration: Year corp. will cease to exist or "perpetual")
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	Dec 18/2000
	(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.	(Principal office address)
	(Principal office address) (Principal office address) (Principal office address) (Principal office address) (Current mailing address)
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
	(Purpose(s) of corporation authorized in nome state of 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 ZIRKINA
o	Florida 33487 (City)
	BOLA RATON, Florida 33487
	(City) (Zip code)
	0. Registered agent's acceptance:
H de fu	Taving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I wither agree to comply with the provisions of all statutes relative to the proper and complete performance of my uties, and I am familiar with and accept the obligations of my position as registered agent.
	m 3/hd)

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.

(Registered agent's signature)

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OTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	JIE: II n	00-01101	
OTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		M bilall	

State of Delaware Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHZW SALES 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 SIXTH DAY OF MARCH, A.D. 2001.

HILED

OI MAR -9 AM 9:55

SECULTIVEY OF STATE,



Warriet Smith Windson Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 1006551

DATE: 03-06-01