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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHARON'S DISTRIBUTORS, INC.
(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:

100004703421--9
-12/04/01--01017--002
*****87.50 *****87.50

MARK FRANKEL

(Name of Person)

SHARON'S DISTRIBUTORS, INC.

(Firm/Company)

2912 NW 11TH AVE.

(Address)

WILTON MANORS, FL. 33311

(City/State and Zip code)

For further information concerning this matter, please call:

MARK FRANKEL

(Name of Person)

at

(954) 270-6604

(Area Code & Daytime Telephone Number)

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

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

FILED
01 DEC -3 PM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/5

**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. SHARON'S DISTRIBUTORS, INCORPORATED
(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. NEW YORK 3. 16-1339029
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/1/1988 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. 2912 NW 11TH AVE, WILTON MANORS, FL 33311
(Principal office address)
SAME
(Current mailing address)
8. SALE OF PET FOOD + SUPPLIES
(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 FRANKEL
Office Address: 2912 NW 11TH AVE
WILTON MANORS, Florida 33311
(City) (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.



(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: MICHAEL CAMARDELLO

Address: 2912 NW 11TH AVE, WILTON MANORS, FL 33311

Vice Chairman: MARK FRANKEL

Address: 2912 NW 11TH AVE, WILTON MANORS, FL 33311

Director: MICHAEL CAMARDELLO

Address: 2912 NW 11TH AVE, WILTON MANORS, FL 33311

Director: _____

Address: _____

B. OFFICERS

President: MICHAEL CAMARDELLO

Address: 2912 NW 11TH AVE, WILTON MANORS, FL 33311

Vice President: MARK FRANKEL

Address: 2912 NW 11TH AVE, WILTON MANORS, FL 33311

Secretary: MARK FRANKEL

Address: 2912 NW 11TH AVE, WILTON MANORS, FL 33311

Treasurer: MARK FRANKEL

Address: 2912 NW 11TH AVE, WILTON MANORS, FL 33311

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

13. Mark Frankel

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

14. MARK FRANKEL

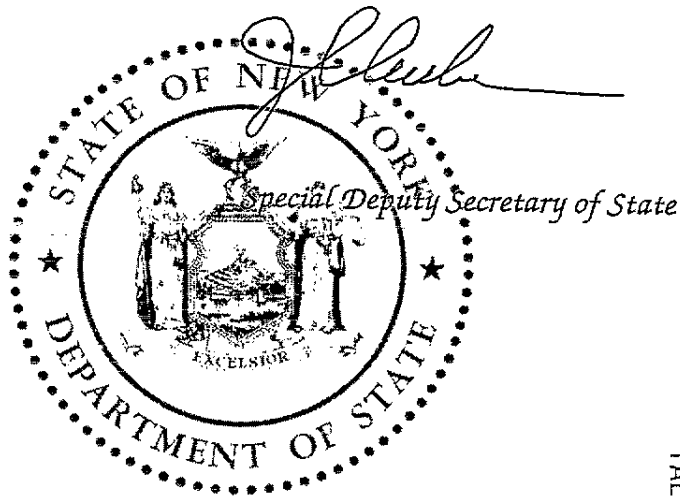
(Typed or printed name and capacity of person signing application)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York } ss:
Department of State

I hereby certify, that the Certificate of Incorporation of SHARON'S DISTRIBUTORS, INC. was filed on 12/01/1988, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 19th day of November
two thousand and one.*



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA