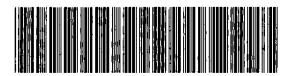
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE TALLAHASSEELFLORIDA

COVER LETTER

TO:	Division of Cor	porations		•	
SUBJ	ECT:	Sherlo Name of corpo	ch	Investigation	cs. Inc.
		Name of corpo	ration	- must include suffix	
Dear S	ir or Madam:				
"Certif	icate of Existenc	ion by Foreign Corporati e," or "Certificate of Goo n corporation to transact	d Stan	ding" and check are sub	
Please	return all corresp	ondence concerning this	matter	to the following:	
		51	rwa	ct Drobnu	
		Na	me of	Person	· · · · · · · · · · · · · · · · · · ·
		Sherlock	5 [Person Truestigation pany	is Inc
		Fire	n/Com	pany	
				((% 0	
			Addre	ess _	
		Nacr.	40	PA	19404 nv. Co M otification)
		City/s	State a	nd Zip code	
		Samba	16	Stumper	nu com
		E-mail address: (to be	used f	or future annual report n	otification)
For fur	ther information	concerning this matter, p			
Stu	Name of Perso	n at (కరుల Area () <u>355 - [[6</u> Code & Daytime Telepho	39 XZZZ- one Number
	STREET/COU New Filing Sec Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	porations g Center Circle		MAILING AND New Filing Senting Division of Control P.O. Box 6327 Tallahassee, F	ction orporations
Enclos	ed is a check for	the following amount:			
□ \$70	0.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

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.	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")					
2.	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Catalogue (State or country under the law of which it is incorporated) (FEI number, if applicable)	Florida)	-			
4.	(Date of incorporation) 5. Per petual (Duration: Year corp. will cease to exist or "per	petual")	_			
6.			_			
7.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 233 feather Sound Drive Stude (Principal office address)					
	Clearwater FL 33762 (Current mailing address)		_			
			=			
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	10 FEB	ALLAHA SECRET			
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	5	SS T			
Ο:	Name: Cindy Talatham ffice Address: 233 feather Sound Drive, Shite A502 Clearwater Fl , Florida 33762 (City) (Zip code)	AH 11: 28	OF STATE			

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.

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

A. DIRECTORS	is	
Chairman:	Stuart Drobny, Sherlak Ju	vastigntimes Inc
	1544 DEKALD STREET	
<u> </u>	Novistan, PA 19401	· · · · · · · · · · · · · · · · · · ·
Vice Chairman:		
Address:		
Director:		O FEC
Address:		8 37
		5 770
Director:		
Address:		28
B. OFFICERS		
President:		patrias , Fac.
Address:	1844 Do Kally Str	•
	Nov. 1.51 mn PA 19401	
Vice President:	·	
Address:		
	· · · · · · · · · · · · · · · · · · ·	
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necess	ssary, you may attach an addendum to the application listing additional officers ar	id/or directors.
13	(Signature of Director or Officer listed in number 12 of the application)	<u></u>
14	Start Drobby President	
	(Typed of printed name and capacity of person signing application)	

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

FEBRUARY 11, 2010

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

SECRETARY OF STATE TALLAHASSFE, FI. ORIDA

I DO HEREBY CERTIFY THAT,

SHERLOCK INVESTIGATIONS, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 8576257-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp