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PICK-UP	WAIT	MAIL
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Special Instructions to Filing (Officer:	
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COVER LETTER

TO:	D: New Filing Section Division of Corporations			
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SORTE	CT: ARAMINE MANAGEMENT CORP Name of corporation	- must include suffix		
	·	mast modes sum.		
Dear Si	r or Madam:			
"Certific	closed "Application by Foreign Corporation for Authoriza ate of Existence," or "Certificate of Good Standing"and end foreign corporation to transact business in Florida.			
Please	return all correspondence concerning this matter to the	following:		
CHENG				
	Name of Person	ו		
ARAMIN	E MANAGEMENT CORP			
	Firm/Company			
<u>41-37 14</u>	9TH PLACE			
	Address			
FLUSHI	NG, NY 11355			
	City/State and Zip o	code		
lingjiango	pa@verizon.net			
	E-mail address: (to be used for future a	nnual report notification)		
For furth	ner information concerning this matter, please call:			
LING JIA	NGat (718)888-009	99		
	Name of Person Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclose	d is a check for the following amount:			
\$70.0		5 Filing Fee & X \$87.50 Filing Fee, ied Copy Certificate of Status & Certified Copy		

ARAMINE MANAGEMENT CORP

20-4599442

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.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. NEW YORK (State or country under the law of which it is incorporated) 4. 3/29/2006 (Date of incorporation) (Date of incorporation) (Date lifest transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 41-37 149TH PLACE, FLUSHING, NY 11355 (Principal office address) 8. ANY LAWFUL PURPOSE (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and streat address of Florida registered agent: (P.O. Box NOT acceptable) Name: Eleanor Wong Office Address; 5060 W. Colonial Dr., Suite 105	1.	ARAMINE MANAGEMENT CORP (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
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Office Address: 5060 W. Colonial Dr., Suite 105	9,	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Office Address: 5060 W. Colonial Dr., Suite 105		
	•	The Name: A second Wong to the Advantage of the Advantage
	∩ff	ino Addresse
Orlando 2000	الناب	Ca Address, 5000 vv. Colonia Dr., Sulfe 105
		Odando
(City) (Zip code)		
(Elb code)	•	
10. Registered agent's acceptance:	10.	Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the	Ηaι	ring 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	0/8	ce 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	сар	lacity. 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.	ar	formance of my duties, and I am familiar with and accept the obligations of my position as registered agent

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)

ATX1

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

A. DIRE	A. DIRECTORS					
Chairman:	CHENG T. SUN					
Address:	41-37 149TH PLACE					
	FLUSHING, NY 11355					
Vice Chairr						
Address:						
Director:	CHENG T. SUN					
Address:	41-37 149TH PLACE					
Addicas.						
Dimenton	FLUSHING, NY 11355	(11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
Director:						
Address: -		TALE TO HERE				
B. OFFI	CERS	AR AR				
President:	CHENG T. SUN	SSEC				
Address:	41-37 149TH PLACE, FLUSHING, NY 11355	TS NETT				
		TATE ORIO				
Vice Presid	ent:	▽				
Address:						
Secretary:	CHENG T. SUN					
Address:	41-37 149TH PLACE, FLUSHING, NY 11355					
Treasurer:						
Address:						
NOTE: If r	necessary, you may attach an addendum to the application listing additional officers an $\frac{1}{2}$	nd/or directors.				
13						
	(Signature of Director or Officer listed in number 12 of the application)					
14. <u>CHEN</u>	G T. SUN (Typed or printed name and capacity of person signing application)					

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ARAMINE MANAGEMENT CORP. was filed on 03/29/2006, 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 an existing corporation.

WIINESS my hand and the official seal of the Department of State at the City of Albany, this 18th day of February two thousand and ten.



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