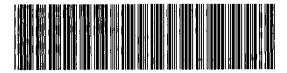
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| Certified Copies | _ Certificates | of Status | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

111 - 36754

COVER LETTER

| TO: New Filing Section Division of Corporations | |
|---|--|
| SUBJECT: SHINE USA, INC. | |
| | on - must include suffix |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation fo "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busing | anding" and check are submitted to register the |
| Please return all correspondence concerning this matter | er to the following: |
| CECILE REVAH | |
| Name o | f Person |
| BUGATCHI UOMO APPAREL, INC. | |
| Firm/Co | mpany |
| 1377 CLINT MOORE ROAD, SUITE 200 | |
| Add | ress |
| BOCA RATON, FL 33487 | |
| City/State | and Zip code |
| bugatchi@msn.com | 7° ~ |
| E-mail address: (to be used | for future annual report notification |
| For further information concerning this matter, please | SSE - 2 |
| CECILE REVAH at (561 | 893-0555 |
| 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 |
| Enclosed is a check for the following amount: | |
| □ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status | ■ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy |



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 7, 2010

Florida Department of State Division of Corporations Attn: Ruby Dunlap P.O. BOX 6327 Tallahassee, FL 32314

Re:

Shine USA, Inc.

Document No. W10000036754

Dear Ms. Dunlap:

Enclosed, please find a "Certificate of Good Standing" from the Secretary of State of the State of Delaware.

This document completes your requirements for our registration as a foreign profit corporation to transact business in the State of Florida.

Should you need additional information, please do not hesitate to contact me direct at (561) 893-0555 ext. 17.

Sincerely,

Katherine Alano

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. SHINE USA, I | NC. corporation; must include "INCORPORATE | D." "COMPANY." "CORPORATI | ON." |
|---|--|--|--|
| "Inc.," "Co.," "C | Corp," "Inc," "Co," or "Corp.") | | J., |
| | | | |
| (If name unavail | lable in Florida, enter alternate corporate nan | ne adopted for the purpose of transac | ting business in Florida) |
| 2. DELAWARE | | 3 30-0631019 | , |
| | under the law of which it is incorporated) | (FEI number, if a | oplicable) |
| 4. APRIL 24, 201 | • | 5 PERPETUAL | · · · · · · |
| | e of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") | |
| 6. | | | |
| o | | in Florida, if prior to registration) 1502, F.S., to determine penalty liab | ility) |
| 7. 1377 CLINT MO | DORE ROAD, SUITE 200, BOCA RATO | N, FL 33487 | |
| | (Principal office a | ldress) | ······································ |
| 1377 CLINT M | OORE ROAD, SUITE 200, BOCA RATO | N, FL 33487 | |
| | (Current mailing a | ldress) | |
| | | | 7A CE |
| | OR BUSINESS PERMITTED UNDER | | |
| (Purpose(s | s) of corporation authorized in home state or | country to be carried out in state of F | Florida NSSE |
| 9. Name and stree | et address of Florida registered agent: (P | .O. Box NOT acceptable) | TARY (|
| Name: | CECILE REVAH | | 79 > U |
| Office Address: | 1377 CLINT MOORE ROAD, SUITE 2 | 200 | 4 12 STATE LORIDA |
| | BOCA RATON | , Florida <u>33487</u> | 70 |
| | (City) | (Zip code) | |
| () Registered as | gent's acceptance: | | |
| Having been nam | ed as registered agent and to accept ser | vice of process for the above state | ed corporation at the place |
| lesignated in this | application, I hereby accept the appoin | tment as registered agent and ag | ree to act in this capacity. |
| uriner agree to co and I am familiar | omply with the provisions of all statutes with and accept the obligations of my p | relative to the proper and compl osition as registered agent. | ete performance of my duti |
| , | The second secon | outility and registered agents | |
| | | | |
| | | | |
| | (Registered agent's signature | e) | |

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: CECILE REVAH | | | | |
| Address: 6631 NEWPORT LAKE CIRCLE | | | | |
| BOCA RATON, FL 33496 | | | | |
| Vice Chairman: | | | | |
| Address: | | | | |
| | | | | |
| Director: | | | | |
| Address: | | | | |
| | | | | |
| Director: | | | | |
| Address: | | | | |
| | | | | |
| B. OFFICERS | | | | |
| President: CECILE REVAH | 201 TAL | | | |
| Address: 6631 NEWPORT LAKE CIRCLE | ARE S | | | |
| BOCA RATON, FL 33496 | ASSI ASSI | | | |
| Vice President: MARCO REVAH | | | | |
| Address: 6663 NEWPORT LAKE CIRCLE, BOCA RATON, FL 33496 | STAI OR | | | |
| 6663 NEWPORT LAKE CIRCLE, BOCA RATON, FL 33496 | DE 2 | | | |
| Secretary: CECILE REVAH | | | | |
| Address: 6631 NEWPORT LAKE CIRCLE, BOCA RATON, FL 33496 | | | | |
| Treasurer: CECILE REVAH | | | | |
| Address: 6631 NEWPORT LAKE CIRCLE, BOCA RATON, FL 33496 | | | | |
| | | | | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officer. | s and/or directors. | | | |
| 13. (Signature of Director or Officer listed in number 12 of the application) | | | | |
| (Signature of Director of Officer fisted in number 12 of the application) 14. CECILE REVAH | | | | |
| (Typed or printed name and capacity of person signing application) | | | | |

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SHINE USA 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 TWENTY-SEVENTH DAY OF

SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

2010 OCT 12 A 9: 12
SECRETARY OF STATE

4814924 8300

100907886

AUTHENTICATION: 8250892

DATE: 09-27-10

You may verify this certificate online at corp.delaware.gov/authver.shtml