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FOREIGN PROFIT/NONPROFIT CORPORATION TOTAL DESKTOP SUPPORT INC.

Certificate of Status	0
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Estimated Charge	\$70.00

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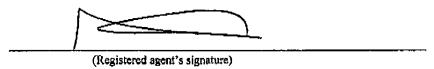
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

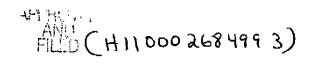
1.		SKTOP SUPPORT INC.		
	(Enter name of a "Inc.," "Co.," "C	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"	
	(If name unavai	lable in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting business	in Florida)
2.	NEW YORK	(STATE	3 45-2633380	
	(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	•
4	06-22-2011		, PERPETUAL	
-		e of incorporation)	(Duration: Year corp. will cease to exist or "p	erpetual")
6.	UPON FILIN	NG.		
			in Florida, if prior to registration) 1502, F.S., to determine penalty Hability)	TALE SEC
7. 55 BOARD STREET, NEW YORK, NY 10004 (Principal office address) 55 BOARD STREET, NEW YORK, NY 10004			多	
			SE	
				ini_
		(Current mailing as	ddress)	
8.	IT SUPPOR	प		STATE PLORIDA
	(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)	
9.	Name and stre	et address of Florida registered agent: (P	O. Box NOT acceptable)	
	Name:	REGISTERED AGENT SOLUTI	ONS, INC.	
Of	fice Address:	155 OFFICE PLAZA DRIVE, SUITE A		
		TALLAHASSEE	, Florida 32301	
		(City)	(Zip code)	

10. Registered agent's acceptance:

Having been named us 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.



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:	11 NOV 10 AH 11: 57
A. DIRECTORS	CECENTALISM IN STRATE
Chairman: MARIAN SANDOMIERSKI	SECRETARY OF STATE TALLAHASSEE FLORIDA
Address: 55 BOARD STREET, NEW YORK, NY 10004	
Vice Chairman:	
Address:	
Director: MARIAN SANDOMIERSKI	
Address: 55 BOARD STREET, NEW YORK, NY 10004	
Director:	
Address:	
B. OFFICERS President: MARIAN SANDOMIERSKI Address: 55 BOARD STREET, NEW YORK, NY 10004	
Vice President:	
Address:	
Secretary:	
Address:	
Address:	
3. O O e (Signature of Director or Officer listed in nurr	ther 12 of the application)
MARIAN SANDOMIERSKI, President	was 12 of the abbreauch

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

(H110002684993)

State of New York Department of State State

I hereby certify, that the Certificate of Incorporation of TOTAL DESKTOP SUPPORT INC. was filed on 06/22/2011, 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. I further certify the following:

Certificate of Change was filed on 07/11/2011.

I further certify, that no other documents have been filed by such Corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 09th day of November two thousand and eleven.

Daniel Shapiro

First Deputy Secretary of State

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SECHETANT OF STATE

