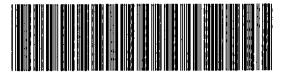
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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APPLICATION 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.

	able in Florida, enter alternate corporate na		of transacting business in Florid	<u>a)</u>
2. GEORGIA, U	under the law of which it is incorporated)	3. <u>58-1341968</u> (FEI nu	umber, if applicable)	
4. 11/13/1978	,			
· ·	of incorporation)	(Duration: Year corp.	will cease to exist or "perpetual"	<u>')</u>
6. <u>01/01/2012</u>				
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60			
_{7.} 1126 PON	CE DE LEON AVE, ATLANT	A, GA 30306		
	(Principal office	ddress)		
1126 PON	CE DE LEON AVE, ATLA		·	_
	(Current mailing	ddress)		
8. LAW FIRM	1		SEI TALL	20.
(Purpose(s	s) of corporation authorized in home state of	country to be carried out i	n state of Florida)	- 7
9. Name and stree	et address of Florida registered agent: (P.O. Box <u>NOT</u> acceptab	in state of Florida) ARE JARY AHASSE le)	
Name:	CHANDLER B. SHARMA		ات لد}	
Office Address:	410 S WARE BLVD		AM IN I	
	TAMPA	, Florida 3361	19	
	(City)		code)	
Having been nam designated in this	gent's acceptance: sed as registered agent and to accept se application, I hereby accept the appoi omply with the provisions of all statute	ntment as registered age	ent and agree to act in this cap	pacity. I

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: CHANDLER B. SHARMA Address: 1126 PONCE DE LEON AVE, ATLANTA, GA 30306 Vice Chairman: Address: Director: Address: ___ Director: __ **B. OFFICERS** Address: _____ Vice President: Address: Secretary: LUIS AMORETTI Address: 410 S WARE BLVD, TAMPA, FL 33619 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Thousandler B-Strange Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

14. CHANDLER B. SHARMA

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

CHANDLER B. SHARMA & ASSOCIATES, P.C.

Domestic Profit Corporation

was formed or was authorized to transact business on 11/13/1978 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 28th day of December, 2011

B:Ph

Brian P. Kemp Secretary of State

Certification Number: 7887254-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp