# F14000003439

(Re	equestor's Name)				
(Ad	<del></del>				
(Address)					
(Cit	ty/State/Zip/Phone	· #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		}			

Office Use Only



400262586384

08/14/14--01024--026 \*\*70.00

14 AUG I 4 PH 2: 41

RECEIVED

14 AUG 18 AH 8: 23

# CORPORATE

When you need ACCESS to the world

ACCESS,
INC.

236 East 6th Avenue. Tallahassee, Florida 32303

	P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666						
WALK IN							
	PICK UP: 8/14						
	CERTIFIED COPY						
17	РНОТОСОРУ						
	cus						
×	( FILING FOYEIGH COUP						
1.	Streetswart Corporation (CORPORATE NAME AND DOCUMENT #)						
0							
2.	(CORPORATE NAME AND DOCUMENT #)						
3.							
	(CORPORATE NAME AND DOCUMENT #)						
4.							
	(CORPORATE NAME AND DOCUMENT #)						
5.	(CORPORATE NAME AND DOCUMENT #)						
•							
6.	(CORPORATE NAME AND DOCUMENT #)						
SPECIA	AL INSTRUCTIONS:						

Corrected

Letter Number: 114A00017554

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 15, 2014

CORPORATE ACCESS, INC.

SUBJECT: STREETSMART CORPORATION

Ref. Number: W14000049971

2014 AUG 18 M 3 OU

We have received your document for STREETSMART CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

www.sunbiz.org

## 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.

<ol> <li>Streets</li> </ol>	Smart Corporation				
(Enter name of "Inc.," "Co.,"	of corporation; must include "INCORPORATED, "Corp," "Inc," "Co," or "Corp.")	" "COMPAI	NY," "CORPORATION,"		
	Smart Corporation of Delaw				
(II name unav	railable in Florida, enter alternate corporate name	adopted for t	the purpose of transacting busin	ess in Florio	la)
2. Delawar	e 3.	46-575	2589		
(State or cou	intry under the law of which it is incorporated)		(FEI number, if applicable	e)	
4. 03/31/2014 (Date of incorporation)		Perpet	ual		
		(Duration:	Year corp. will cease to exist of	or "perpetua	l''')
6.					
	(SEE SECTIONS 607.1501 & 607.1 nante Ave., Coral Gables, FI (Principal office add	33136 lress)	determine penalty liability)	126C	H 71
<u>590 Rei</u>	nante Ave., Coral Gables, FI			<u> </u>	AU(
	(Current mailing add	lress)		3# TE (2) (3) (4) (5)	<u>~</u>
8. Name and st	reet address of Florida registered agent: (P.	O. Box NO	<u>(T</u> acceptable)	: 111 C.:	
Name	Paracorp Incorporated	<del></del>		10 A	8: 2
Office Address:	236 East 6th Avenue			(Be-	ట
	Tallahassee	, Flor	ida 32303		
	(City)	, , , , , , , , , , , , , , , , , , , ,	(Zip code)		

#### 9. 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.

Mil for NINH HO, ASST. SECRETARY

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Choirman: Ashar Aziz Address: 590 Reinante Ave. Coral Gables, FL 33156 Vice Chairman: Address: Director: Address: Director: \_ Address: \_\_ B. OFFICERS President: Ashar Aziz Address: 590 Reinante Ave. Coral Gables, FL 33136 Vice President: Secretary: Ashar Aziz Address: 590 Reinante Ave., Coral Gables, FL 33136 Treasurer: Ashar Aziz Address: 590 Reinante Ave., Coral Gables, FL 33136 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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

a third degree felony as provided for in s.817.155, F.S.

Ashar Aziz, President

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

are true and that he or she is aware that false information submitted in a document to the Department of State constitutes

# Delaware

PAGE :

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "STREETSMART CORPORATION" 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 THIRTEENTH DAY OF AUGUST,
A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STREETSMART CORPORATION" WAS INCORPORATED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2014.

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

14 AUG 18 AH 8: 23

5499266 8300

141069259

AUTHENTY CATION: 1618734

DATE: 08-13-14

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