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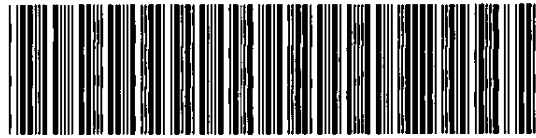
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TALLAHASSEE, FLORIDA

MAY 18 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SWAMINARAYAN SHUBH SANSKAR SANSTHA INC.
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

KIRIT G. PATEL
Name of Person
Firm/Company
8133 BRINEGAR CIR
Address
TAMPA, FL 33647-1769
City/State and Zip Code
PAYALCPA1@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAYAL PATEL at (224) 622-3876
Name of Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. SWAMINARAYAN SHUBH SANSKAR SANSTHA INC.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW YORK, USA 3. 27-3181487
 (State or country under the law of which it is incorporated) (FEI number, if applicable)
 4. JULY 9, 2010 5. PERPETUAL
 (Date of Incorporation) (Date of duration, if other than perpetual)

6. N/A
 (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 42-15 65TH PLACE, WOODSIDE, NEWYORK 11377
 (Principal office address)

(Current mailing address, if different)

8. RELIGIOUS - *Running Religious activities eg. prayers, worships, ritual activities.*
 (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: KIRIT G. PATEL
 Office Address: 8133 BRINEGAR CIR
 TAMPA, Florida 33647-1769
 (City) (Zip Code)

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 TALLAHASSEE, FLORIDA
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10. 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.


 (Registered agent's signature)

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 addresses of officers and/or directors

A. DIRECTORS

KIRIT G. PATEL

Chairman: _____
8133 BRINEGAR CIR, TAMPA, FL 33647-1769
Address: _____

MANISH PATEL

Vice Chairman: _____
3079 PANTHER DR, LAKELAND, FL 33812-5124
Address: _____

RAMESH HIRANI

Director: _____
10483 LUCAYA DR, TAMPA, FL 33647-3325
Address: _____

KIRIT G. PATEL

Director: _____
8133 BRINEGAR CIR, TAMPA, FL 33647-1769
Address: _____

B. OFFICERS

KIRIT G. PATEL

President: _____
8133 BRINEGAR CIR, TAMPA, FL 33647-1769
Address: _____

MANISH PATEL

Vice President: _____
3079 PANTHER DR, LAKELAND, FL 33812-5124
Address: _____

RAMESH HIRANI

Secretary: _____
10483 LUCAYA DR, TAMPA, FL 33647-3325
Address: _____


KIRIT G. PATEL

Treasurer: _____
8133 BRINEGAR CIR, TAMPA, FL 33647-1769
Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. PRESIDENT  _____
(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 SWAMINARAYAN SHUBH SANSKAR SANSTHA INC. was filed on 07/09/2010, as a Not-for-Profit Corporation 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 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 16th day of May two
thousand and sixteen.*

Anthony Scardino

Executive Deputy Secretary of State