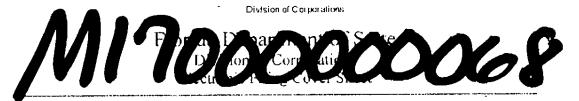
1/3/2017



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION ENHERENT CORP.

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$720.00

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COVER LETTER

	tration Section ion of Corporations	
SUBJECT:	Enherent Corp.	
30.001.01.	Name of corporation	on - must include suffix
Dear Sir or M	adam:	
"Certificate o	"Application by Foreign Corporation for Existence," or "Certificate of Good Stoced foreign corporation to transact busing	or Authorization to Transact Business in Florida," anding" and check are submitted to register the ness in Florida.
Please return	all correspondence concerning this matt	ter to the following:
Aronava De		
	Name o	of Person
Enherent Corp	> .	
	Firm/Cc	ompany
6800 Jericho T	Tpke, Suite 116E	
	Ado	dress
Syosset, NY 1	1791	
	City/State	and Zip code
ade/@enherent		
	E-mail address: (to be use	d for future annual report notification)
For further in	formation concerning this matter, please	e call:
Arunava De 516 932 - 9080 ext 14 Name of Person Area Code Daytime Telephone Number		
Nam	ne of Person Area Co	ode Daytime Telephone Number
Regi: Divis Clifto 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314
Enclosed is a	check for the following amount:	
■ \$70,00 Fi	iling Fee S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy

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.

(II name unavana	ble in Florida, enter alternate corporate name:	adopted for the purpose of transacting business in Florida)			
Delaware					
(State or country	3. under the law of which it is incorporated)	(FEI number, if applicable)			
		Perpetual			
(Date	5. of incorporation)	(Date of duration, if other than perpetual)			
1/1/2017					
	(SEE SECTIONS 607 1501 & 607 1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
6800 Jericho Tpk	e, Suite 116E, Syosset, NY 11791				
·		oul office address)			
	(Current maili	ng address, if different)			
		D. Box NOT acceptable)			
Name and stree	t address of Florida registered agent: (P.C	J. Box NOT acceptable)			
Name:	C T Corporation System	<u> </u>			
Office Address:	1200 South Pine Island Road				
	Plantation	, Florida			
	(City)	(Zip code)			

Mittle Charinand (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.

To. Page 6 of 7

ECTORS				
Thomas Minerva				
6800 Jericho Tpke, Suite 116E, Sy	osset, NY 11791			<u> </u>
denian:				
6800 Jericho Tpke, Suite 116E, Sy	occur NV 11701			
Douglas Mellinger				
6800 Jericho Tpke, Suite 116E, Sy	osset, NY 11791			
Faith Griffin				
6800 Jericho Tpke, Suite 116E, Sy	occar NV 11791			
TICERS				
Pamela Fredette				
6800 Jericho Tpke, Suite 116E. Sy	100 Cet NY 11701			= =
	•			مريد مريد موسد مريد موسد مريد
sident:				
				- E.
Artmava De				7.
6800 Jericho Tpke, Suite 116E, Sy	zosset, NY 11791			·
Arunava De				
6800 Jericho Tpke, Suite 116E, Sy	yosset, NY 11791		<u> </u>	
: If necessary, you may attach an	addendum to the app	lication listing additio	nal officers and/o	r directors.

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.

13. Armaya De - Secretary & Treasurer

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



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENHERENT CORP." 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 THIRD DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 201802000

Date: 01-03-17