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MAR 23 788 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corpora		
SUBJECT: SH	PRE - ORIGINAL, Name of corporation - ma	INC.
	Name of corporation - m	ust include suffix
Dear Sir or Madam:		
"Certificate of Existence,"		norization to Transact Business in Florida," g" and check are submitted to register the Florida.
Please return all correspond	dence concerning this matter to t	he following:
ANGELA	SCHAOL	
	SCHAOL Name of Person	on
SHARE-	ORIGINAC, /NC. Firm/Company	
	Firm/Company	,
1515 N.T	REDERAL HIGHWA Address	9 Suite 300
***	Address	
BOCA RA	970N, FZ 33432 City/State and Z	
919371NC 5111	PRE-ORIGINIAN, COI E-mail address: (to be used for fi	12 · AN GOZA, STARCE. USO GOTALL. Co
For further information con	cerning this matter, please call:	
ANGIEN Sirno	at () 17)	704 03/1 Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number
STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the	following amount:	
S70.00 Filing Fee		8.75 Filing Fee & S87.50 Filing Fee, rtified Copy Certificate of Status & Certified Copy

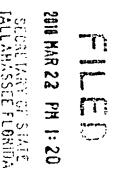
AHERTION: JENNA D. HARRIS 7-PAGES total

> FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2018

ANGELA SCHADL 1515 N FEDERAL HIGHWAY, SUITE 300 BOCA RATON, FL 33432

SUBJECT: SHARE-ORIGINAL INC. Ref. Number: W18000024940



We have received your document for SHARE-ORIGINAL INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, clated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 018A00005200

RECEIVED MAR 272 2018

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. (Enter name of corporation; must include "INCORPORATED," "COMPANY." "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. DELAWARE

(State or country under the law of which it is incorporated)

3. 32-0549339

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 1515 N. TEDERAZ HIGHWAY, SUITE 300 BUCA RATION FL, 33 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) _ ANGELA SCHOOL Name: (City)

(862 BRIDGEWOOD DRIVE

BOCH RATON Florida 33432
(City) (Zip code) Office Address: 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.

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

A. DIRECT		
	YASTIN STUTECTE-HONG	
Address:	MONDSCHEINGLES P, JUAZ FERNITZ, MUTRIA	
Vice Chairmar	nan: PNGERA SCHAOC	
	1862 BRIDGANOOD DRIVE	
	2	
Director:		
Address:		
Director:		
B. OFFICE	ERS	
President:		<u>-</u>
Address:		
Vice President	ent:	
	7AU	
Sucretorie	SSS SSS SSS SSS SSS SSS SSS SSS SSS SS	PROSERV
	Maria Para Para Para Para Para Para Para	
		grant,
	> O	
Address:		
NOTE: If no	necessary, you may attach an addendum to the application listing additional officers and or director	·s.
12		
The officer o	Signature of Director or Officer or director signing this document (and who is listed in number 11 above) affirms that the facts state	ed herein
are true and t	I that he or she is aware that false information submitted in a document to the Department of State of	
	Vasmin Shir	1001
13.	(Typed or printed name and capacity of person signing application)	
	V/\][" ~\.(\);	_ \/\

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SHARE-ORIGINAL INC." 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 TWENTIETH DAY OF MARCH, A.D. 2018.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SHARE-ORIGINAL INC." WAS INCORPORATED ON THE SEVENTH DAY OF DECEMBER, A.D. 2017.

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

Authentication: 202357880

Date: 03-20-18

6651425 8300 SR# 20182058622