F9600004103

Division of Corporations	
SUBJECT: She Mike Include suffix) (Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following: 50001860 -06/12/9601124	455 001
Phelda R Bell W16-12	78.75 しろい
SheMike Inc (Firm/Company)	. 1.
5251 Garlanger TR. 95	/ 2 } A
Ouredo FL. 32765	
9. St. St. St. St. St. St. St. St. St. St	er state
Should you need to call someone concerning this matter, please call:	
(Name of Person) at (467) 35-366-480 (Area Code & Daytime Telephone Number)	

COURIER ADDRESS:

TO:

Qualification/l'ax Lien Section

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 To whene it may conce I trust this obscurrent will sugue of till be glad to such another. il sugue,



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 13, 1996

SHELDA R. BELL SHEMIKE INC. 5251 GARLANGER TR. OVIEDO, FL 32765

SUBJECT: SHEMIKE INC. Ref. Number: W96000012630

We have received your document for SHEMIKE INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The certificate of existence that you submitted is over 90 days old.

A certificate of existence, dated 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 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 (904) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 096A00029493

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:

1. Cheplike INC
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "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.)
2. Doller De Jacobs 1550 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)
Two Gi
4. (Date of Incorporation) 5. (Duration: Year corp. will dease to expression) "perpetual"
6. Hole first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7
5301 GAN/ONESE TR OVICE OF FID 32736 (Current mailing address)
8. Home plan
8. The state of Florida) (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 or Mail Drop Box NOT acceptable)
Name:
Office Address: 5351 692/311712 12 Outselo, Florida, 77765 (Zip Code)
Olicelo, Florida, 32765
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 NOT	and addresses of officers and/or directors: (Street address ONLY- P. O. Box acceptable)	•
A. DIREC	CTORS (Street address only- P. O . Box NOT acceptable)	
Chairman:		
Address: _		•
_		•
Vice Chairn	nan:	•
Address: _		•
-		•
Director:		,
Address:		
Director: _		S
Address:	,	
		Ś
B. OFFICE	same (per cer addites) (till), T. O. TOX (ACA) HEEGDINING)	<u> </u>
President: 2	Phelda R. Bell	.o
Address:	5251 garlanger TR.	
	Oviedo FL: 32765	
Vice Preside	nt: At Richard M. Bell	
Address:	5951 garlanger TR.	
	Duredo FL. 32765	
Secretary:		
Address:		
Treasurer: 🔏	PichARD M. BSII	
Address:	5281 Garlanger TR.	
(Ovieda FL. 39765	
NOTE: If ne officers and/o	ccessary, you may attach an addendum to the application listing additional or directors.	
13. Signa	ture of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14 S)	Nelda R. 13ell (Typed or printed name and capacity of person signing application)	

State of Delaware

Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHEMIKE 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 TWENTY-NINTH DAY OF JULY, A.D. 1996.

TANS OF ANY SECURE

Edward J. Freel, Secretary of State

AUTHENTICATION

DATE

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07-29-96