F98000005683

SUBJECT:	SHARDA CORPORATION	
	(Name of corporation - must include suf	fix)
	·	1000026083617
Dear Sir or Madam:		-08/05/9801097002 *****70.00 *****70.00
The enclosed "Anni	ication by Foreign Corporation for Authorization to Tra	insact Business in Florida",
"Certificate of Exist	tence", and check are submitted to register the above ref	erenced foreign corporation to
transact business in	Florida.	
		W98-17817
Please return all cor	respondence concerning this matter to the following:	M10 1.19"
	Sharon L. McMaster	
	(Name of Person)	- 0 m /12
		3/10/12-
	Sharda Corporation	
	(Firm/Company)	8. /is
	1521 SW Avens Street	SECRETAF DIVISION OF
	(Address)	2.07
	Port St. Lucie, FL 34983	LED ORPORATION ALL
-	(City/State/Zip)	છે ∂
		E 25
Should you need to	call someone concerning this matter, please call:	ξή
		•
Girana T. MaM	aster at (561) 871-0083	
Sharon L. McM		Celenhana Number)
(Name of	Person) (Area Code & Daytime 1	elebuore 14mnoer)

COURIER ADDRESS:

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

Qualification/Tax Lien Section

Division of Corporations

To:

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 6, 1998

SHARON L. MCMASTER SHARDA CORPORATION 1521 SW AVENS ST. PORT ST. LUCIE, FL 34983

SUBJECT: SHARDA CORPORATION

Ref. Number: W98000017817

We have received your document for SHARDA CORPORATION and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name 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 (850) 487-6095.

Jennifer Sindt Document Examiner Letter Number: 098A00041038

SECRETARY OF STATE DIVISION OF CORPORATIONS

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. SHARDA CORPORATION		DDDD ATTONIY	· · · · · · · · · · · · · · · · · · ·
(Name of corporation; must include the word "INCORF words or abbreviations of like import in language as will	ORATED", "COMPANY", "C	oration instead of a	
natural person or partnership if not so contained in the r	ame at present.)		
2Nevada	365-0846131		
(State or country under the law of which it is incorporate	d) (FEI nu	mber, if applicable)	
4 5	Perpetual		:
(Date of incorporation)	(Duration: Year corp. will o	ease to exist or "perpe	tual")
6. None to date			
(Date first transacted business in Florida.) (SEE S	ECTIONS 607.1501, 607.1502 a	and 817.155, F.S.)	A10
7. 1521 SW Avens Street, Port St. Lu	cie, FL 34983		SEC ISEC
(Current mail	NO PROPERTY.		
			LED Y OF ST ORPCR
8 Consulting	<u>v</u> 88°°		
(Purpose(s) of corporation authorized in home sta	te or country to be carried out it	n state of Florida)	# NAME
9. Name and street address of Florida registered a	gent: (P.O. Box or Mail Drop	Box NOT acceptab	ole)
Name: H. Dale Briscoe	<u> </u>		i ·
Office Address: 1521 SW Avens Street			
· · · · · · · · · · · · · · · · · · ·	34983		-
Port St. Lucie	Florida,(Zip co		· -
	` *	,	
10. Registered agent's acceptance:			
Having been named as registered agent and to accept ser in this application, I hereby accept the appointment as re comply with the provisions of all statutes relative to the p and accept the obligations of my position as registered ag	gistered agent and agree to act roper and complete performanc	in this capacity. I fur	ther agree to
11/1.18	4		
(Registered as	ent's signature)		r

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: (Street address ONLY - P.O. Box NOT acceptable) A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: H. Dale Briscoe 1521 SW Avens Street Address: __ Port St. Lucie, FL 34983 Vice Chairman: Sharon L. McMaster Address: ____ 1521 SW Avens Street Port St. Lucie, FL 34983 Director: _ Address: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: H. Dale Briscoe Address: ____ Same as above Vice President: Sharon L. McMaster Address: ____ Same as above Secretary: _____ Sharon L. McMaster Treasurer: Sharon L. McMaster Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

14. Sharon L. McMaster Vice Chairman



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SHARDA CORPORATION**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 27, 1998, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on July 27, 1998.

Secretary of State

Ву

Certification Clerk

INVISION OF CORPORATION