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(Reque	stor's Name)	
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PICK-UP	WAIT MAIL	
(Busine	ess Entity Name)	
(Docum	nent Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filin	ng Officer;	

A. LUNT

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EXAMINER

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	O Coltaine
SUBJECT: SHARVARMAY LLC	Co Mar o
Na Na	me of Limited Liability Company
The enclosed "Application by Foreign Limited Lial Existence, and check are submitted to register the a	bility Company for Authorization to Transact Business in Florida," Certificate on above referenced foreign limited liability company to transact business in Floridation.
Please return all correspondence concerning this m	atter to the following:
BELFORD S. LESTER,	ESQ
-	Name of Person
BELFORD S. LESTER P	.A.
	Firm/Company
5403 JESSAMINE LAN	IE, SUITE A
	Address Address 2839
ORLANDO, FLORIDA 3	2000
	City/State and Zip Code
BSLLAW@BELLSOL	သည်။ သည်။ JTH.NET မြို့ကို မွှ
E-mail address:	(to be used for future annual report notification)
For further information concerning this matter, ple	ase call:
BELFORD S. LESTER	at (407) 854-9960 Area Code & Daytime Telephone Number
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	STREET ADDRESS: Division of Corporations Registration Section Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amo \$\int\\$125.00 \text{ Filing Fee} \text{\$\sum_{\text{Strift}}\$130.00 \text{ Filing F}}\$ Certificate of St	Fee & []\$155.00 Filing Fee & [\$160.00 Filing Fee, Certificate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

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Typed or printed name of signee

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

BELFORD S. LESTER, ESQ. for Belford S. Lester P.A.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:		
SHARVARMAY LLC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:	2010 DEC 20	
HENRY VARLEY GRANTHAM, JR.	SEEC	-
(Name)	- 100 P	
2064 VENETIAN WAY, Florida Street Address (P.O. Box NOT ACCEPTABLE)	\$: 	
WINTER PARK FL 32789 City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Sigrature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

State of Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

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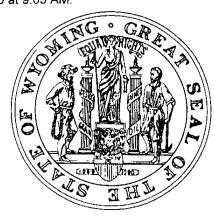
I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office.

Sharvarmay LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **December 6, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000593528**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 10th day of December, 2010 at 9:05 AM.



May Maffield Secretary of State

By Wachai Jown KIT