PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 10 PM 2:15

DOCUMENT # P02000015322

1. Corporation Name

STERLING PURCHASING CORP.

100024048521
10/23/03--01052--010 **750.00

REINSTATEMENT

2. Principal Office Address	3. Mailing Office Address
2226 8th Street	2226 8th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sarasota, FL	City & State: Sarasota, FL
Zip: 34237 Country:	Zip: 34237 Country:

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 03-0384690 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Tom Shapiro

Street Address (P.O. Box Number is Not Acceptable): 2226 8th Street

Suite, Apt. #, Etc.:

City: Sarasota State: FL Zip Code: 34237

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Tom Shapiro Date: 10/9/03

REGISTERED AGENT MUST SIGN

CR2E061 (10/02)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Tom Shapiro	2226 8th Street	Sarasota, FL 34237
S/D	Steve Shapiro	2226 8th Street	Sarasota, FL 34237
AS/AT	Debbie Shapiro	2226 8th Street	Sarasota, FL 34237
T/D	Jack Mead	2226 8th Street	Sarasota, FL 34237
D	Bala Venkataraman	2226 8th Street	Sarasota, FL 34237

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Tom Shapiro, President 10/09/03 (941) 955-8787

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #