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Florida Department of State
Division of Corporations
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FOREIGN PROFIT QUALIFICATION

Mount Glacier Corporation

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W04-41678

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

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TALLAHASSEE, FLORIDA

November 15, 2004

CUMMINGS & LOCKWOOD

SUBJECT: MOUNT GLACIER CORPORATION
REF: W04000041678

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, 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 (850) 245-6043.

Joey Bryan
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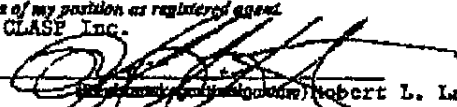
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA.

1. Mount Glacier Corporation
(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. Nevada 3. 91-2085624
(State or country under the law of which it is incorporated) (FID number, if applicable)
4. November 3, 2000 5. Perpetual
(Date of incorporation) (Duration; Year corp. will cease to exist or "perpetual")
6. November 15, 2004
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and §17.353, F.S.)
7. 21218 Saint Andrews Boulevard PMB 409
(Principal office address)
Boca Raton, Florida 33433
(Current mailing address)
8. Consulting and any lawful business purpose permitted under the Florida Business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Corporation Act.
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: CLASF Inc.
Office Address: 3001 Tamiami Trail North
4th Floor
Naples Florida, 34103
(Zip Code)
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.
CLASF Inc.
By:  Robert L. Lancaster, Vice President
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)

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TALLAHASSEE, FLORIDA

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____
 Address: _____

 Vice Chairman: _____
 Address: _____

 Director: Robert B. Sando
 Address: 21218 Saint Andrews Boulevard #200 PMB 409
Boca Raton, Florida 33433
 Director: _____
 Address: _____

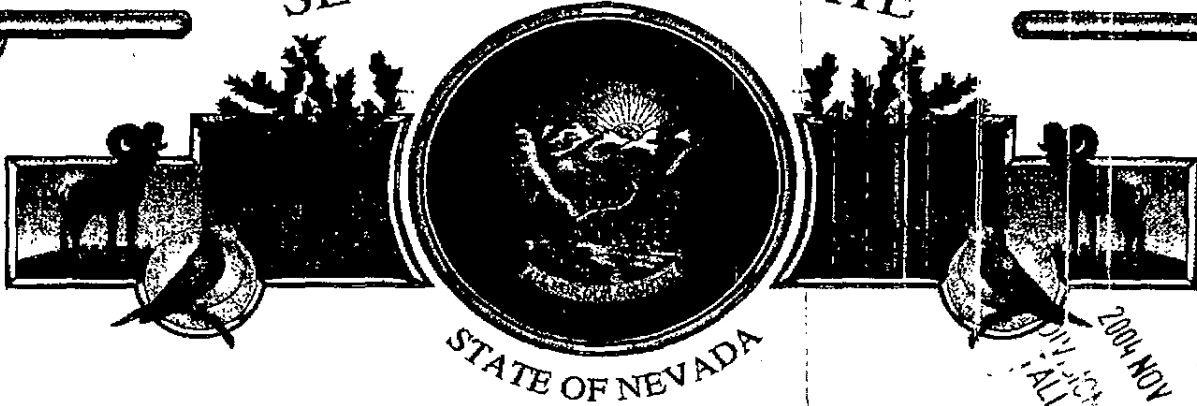
B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Robert B. Sando
 Address: 21218 Saint Andrews Boulevard #200 PMB 409
Boca Raton, Florida 33433
 Vice President: _____
 Address: _____
 Secretary: Robert B. Sando
 Address: 21218 Saint Andrews Boulevard #200 PMB 409
Boca Raton, Florida 33433
 Treasurer: Jacquelyn Jeanne Sando
 Address: 21218 Saint Andrews Boulevard #200 PMB 409
Boca Raton, Florida 33433

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
 14. Robert B. Sando, President
 (Typed or printed name and capacity of person signing application)

SECRETARY OF STATE

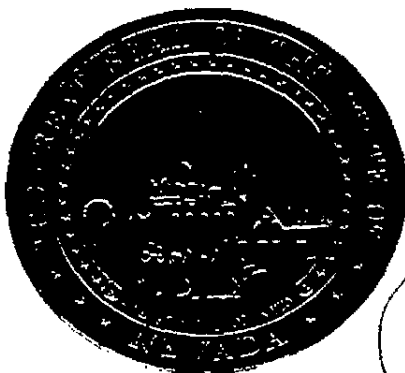


CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

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, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability limited partnerships, limited-liability partnerships and business trusts 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, **MOUNT GLACIER 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 November 3, 2000, 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 November 16, 2004



Dean Heller

DEAN HELLER
Secretary of State

By

Deanne W. Wray
Certification Clerk

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MOUNT GLACIER CORPORATION
TALLAHASSEE, FLORIDA