

		167
TO: Registration Section Division of Corporations	_	, –
SUBJECT: Sky Venture, Inc.		
(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. 900046178092 -10/01/0101044003		
Please return all correspondence concerning this matte		*****78.75 *****78.75
Robin Mitchen		
(Nome of Paran)		
Sky Fun	1. Inc.	401-22857
(Firm/Company)		
6807-A Visitors Circle		
(Address)		
Orlando, Fl. 32819 (City/State and Zip code)		
(City/State	and Zip code)	no conflict w/ p97-78523
For further information concerning this matter, please call:		p97-78523
Robin Mitchem at (407) 903-1370		
(Name of Person) (Area	Code & Daytime Telephone	- [.]
		SECRE SIVISION OF NOV
STREET ADDRESS:	MAILING ADDRESS:	OV ION
Registration Section	Registration Section	IS STATE
Division of Corporations	Division of Corporations P.O. Box 6327	P ONE
409 E. Gaines St. Tallahassee, FL 32399	Tallahassee, FL 32314	F ST PORA F12:
Enclosed is a check for the following amount:		33 33
\$70.00 Filing Fee \$\frac{1}{2}\$\$\frac{1}{2}\$\$\$\$\$78.75 Filing Fee & Certificate of Status	3 \$78.75 Filing Fee & Certified Copy	3 \$87.50 Filing Fee, Certificate of Status & Certified Copy





FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 3, 2001

ROBIN MITCHEM SKY FUN 1, INC. 6807-A VISITORS CIRCLE ORLANDO, FL 32819

SUBJECT: SKYVENTURE, INC. Ref. Number: W01000022857

SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
ON NOV 15 PH 12: 33

We have received your document for SKYVENTURE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

A brief description of the entity's nature of business must be included in the document.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 501A00055454

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. (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.) (State or country under the law of which it is incorporated) Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: Florida_ 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 and business addresses of officers and/or directors: A. DIRECTORS William J. Kitchen Visitors Circle, Orlando, Jr. 32819 Vice Chairman: Director: Address: Director: Address: **B. OFFICERS** President: William J. Circle, Driando Vice President: Address: ___ Secretary: _ 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) President

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



STATE OF COLORADO

DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

SKY VENTURE, INC. (Colorado CORPORATION) File # 19971018607

was filed in this office on February 6, 1997 and has complied with the applicable provisions of the laws of the State of Colorado and on this date is in good standing and authorized and competent to transact business or to conduct its affairs within this state.

Dated: August 6, 2001

OI NOV 15 PM 12: 34

For Validation:

Certificate ID: 503188

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

www.sos.state.co.us/ValidateCertificate

Vonetta Javidson SECRETARY OF STATE