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RIA2

5.

TO: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: S&S Power, 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.

Please return all correspondence concerning this matter to the following:

Beverly Adair, - Controller

(Name of Person)

100003269371--4

-05/26/00--01117--005

\*\*\*\*70.00 \*\*\*\*70.00

S&S Power, Inc.

(Firm/Company)

350 West 2500 North

(Address)

Logan, UT 84341

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Beverly Adair

(Name of Person)

at ( 435 ) 752-1987

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

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

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

RIA2

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. S&S Power, Inc.

(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. Utah

(State or country under the law of which it is incorporated)

3. 87-0644372

(FEI number, if applicable)

4. December 28, 1999

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. June 1, 2000

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 350 West 2500 North

Logan, UT 84341

(Current mailing address)

8. Sales of Amusement Rides

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: CT Corporation System

Office Address: 1200 South Pine Island Rd.

Plantation, Florida

Florida, 33324

(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.

Marcia J. Sumakura  
(Registered agent's signature) ASST. V.P.

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: See Attached

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**President: See Attached

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Rich Allen, Vice President

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

## S & S Power Inc. - Officers

Name	Title	Date of Birth	SS#	Address
Stan Checketts	Chief Executive Officer	2/6/41	529-50-9562	880 East Canyon Rd. Providence Utah 84332
Rich Allen	Vice President/General Manager	5/1/47	271-42-6995	980 Canterbury Logan Utah 84321
Bob Crates	Director	6/15/62	413-21-8780	222 West 4th St.,P5 Fort Worth, Tx 76102
Kelly Thompson	Director	1/4/59	451-76-3514	28 Valley Ridge Rd. Ft. Worth, Tx 76107

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FBI - FT. WORTH  
MAY 26 1980



**Utah Department of Commerce**  
**Division of Corporations & Commercial Code**  
160 East 300 South, 2nd Floor, Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Fax: (801) 530-6438  
Web site: <http://www.commerce.state.ut.us>

April 27, 2000

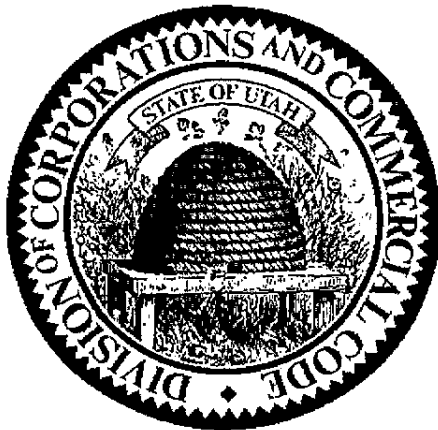
LORRAINE MICHAELS  
S & S POWER, INC.  
350 W 250 N  
LOGAN UT 84341

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## **CERTIFICATE OF EXISTENCE**

**Registration Number:** 3089857  
**Business Name:** S & S POWER, INC.  
**Registered Date:** DECEMBER 28, 1999  
**Foreign or Domestic:** DOMESTIC  
**Current Status:** GOOD STANDING

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah.



Lorena Riffo-Jenson  
Division Director of  
Corporations and Commercial Code

RECEIVED  
DIVISION OF CORPORATIONS AND COMMERCIAL CODE  
APR 27 2000

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Dept. of Professional Licensing  
(801)530-6628

Real Estate  
(801)530-6747

Public Utilities  
(801)530-6651

Securities  
(801)530-6600

Consumer Protection  
(801)530-6601