F0000006700

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Kidz	Zone Playsyst	ems, INC.
(Name of corpo	ration - must include(suffix)	,
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence", and check are submitted to transact business in Florida.	l to register the above reference	ed foreign corporation
Please return all correspondence concerning this ma	atter to the following: Preslev	0003478546 -11/28/0001070002 *****70.80 ******70.80
Kidz Zone P	le of Person) (aysystems, T /Company)	NC.
_ ` ` `	ve, PO F	Box 987
Somerset, (City/Sta	KY 42502 – ate and Zip code)	0987
For further information concerning this matter, please	se call:	
(Name of Person) at (60)	<u> </u>	Number) LLAH
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	ARY OF STATE ASSEE, FLORIDA
Enclosed is a check for the following amount:		inth
\$70.00 Filing Fee \$\Boxed{\sigma}\$ S78.75 Filing Fee \$\&\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, 12/4 Certificate of Status & Certified Copy

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 world "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) (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) (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.) (Current mailing address) (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) Name: Office Address: (City) 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. DIRE	CTORS
Chairman:	Michael R. Presley
Address:	217 Murphy Ave., PO Box 987
_	Somerset, XY 42502-0987
Vice Chair	man: Kerry W. Morrow
Address:	217 Murphy Ave., PO Box 987
	Somerset, KY 42502-0987
Director:	Scott W. Miller & Colin F. Page & Cecil O, Fairris
Address:	217 Murphy Ave., PO Box 987
_	Somerset, KY 42502-0987
Director:	Russell K. Presley & Jonathan W. Hardesty
	6144 Raleigh St., #1301 1531 Diawa Court
_	Orlando, FL 32835 Murfreesboro = IN 37128
B. OFFI	/一名 _
	Michael R. Presley
Address:	Michael R. Presley 217 Murphy Ave., PO Box 987
	Somerset. 1 KV 142502-0987 93 №
Vice Presi	ient: Russell K. Presley Jonathan W. Hardesty Colin F. Page & Ecil O. Fairn's
	6144 Raleigh St. #1301 1531 Diama Court 217 Murphy Ave., POB 987
	Orlando, FL 32835 Murfreesboro, TN 37128 Somerset, KY 42502-0987
	Scott W. Miller
	217 Murphy Aue., PO Box 987, Somerset, KY 42502-0987
Treasurer:	Kerry W. Morrow
Address: _	217 Murphy Ave., PO Box 987, Somerset, KY 42502-0987
NOTE: I	f 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	Michael B. Presley President
- ·· <u></u>	(Typed or printed name and capacity of person signing application)



John Y. Brown III **Secretary of State**

Certificate of Existence

I, JOHN Y. BROWN III, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

KIDZ ZONE PLAYSYSTEMS, INC.

is a corporation duly organized and existing under KRS Chapter 271B whose date of incorporation is December 10, 1997 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of Staten have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 271B.16-220 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 17th day of November, 2000.

N Y. BROWN III Secretary of State

Commonwealth of Kentucky

Pmclean/0442640