F02000002111

TRANSMITTAL LETTER

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Certificate of Status & Certified Copy

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Certificate of Status



North Carolina Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

POWER PLAY AMUSEMENTS INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 23rd day of December, 1993, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 19th day of March, 2002.

Elaine J. Marshall.

Secretary of State



Certification Number: 5979154-1 Page: 1 of 1 Ref.# 4780956-DH Verify this certificate online at www.secretary.state.nc.us/Verification.

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. lay Amusements (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.) North Carolina 3. 56-1856016
(State or country under the law of which it is incorporated) (FEI number, if applicable) December 23, 1993 5.

(Date of incorporation) 5. (Duration: 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.) 1460 Hwy. 78 West okeechobee, FL (Principal office address) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: 1460 Hwy 18 West
OKeechobee,
(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.

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.

Cheryl a Fiste.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: _ Address: Vice Chairman: ___ Address: __ Director: _ Address: _ Director: Address: _ B. OFFICERS President: Chery 1 A. Fiste Address: 2806 5, E. 26th Court Okeechobee, FL 349 Vice President: Same Address: ____ Address: 2806 S.E. 20th Court, OKEECHOBEE, FL 349 Treasurer: Same 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) 14. Chery A. Fiste President Registred (Typed or printed name and capacity of person signing application)