

TO: Registration Section Division of Corporations		
SUBJECT: HOPKIN	US RIDES, INC.	
	poration - 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.	on for Authorization to Transact Business in Florida", ed to register the above referenced foreign corporation	
Please return all correspondence concerning this n	matter to the following:	
JEARE	EY C. DAVIS	
•	ame of Person)	
	5 RIDES, TASCIONETE 4522-001 m/Company) -07/30/0201022001 ******87.50 *******87.	
6130 BA	HUNE DRIVE (Address)	
/ ANTIVE (City/S	CITY, FL 32404 State and Zip code)	
For further information concerning this matter, pla	lease call;	
VINCENT PIC-PARIS at (8	50) 636-4000 XX II	
(Name of Person) (A	Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section	•
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	-
Enclosed is a check for the following amount:		
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status		
	F02-3890	

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. HOPKINS RIDES, TUCORPORATED

(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.) NEW HAMPSHIRE

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

3. 02-0523977

(FEI number, if applicable) (Date of incorporation)

5. FERPETUAL
(Duration: Year corp. will cease to exist or "perpetual") JUNE 1, 2002 (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.) 6130 BAYLINE DRIVE, PANAMA CITY,
(Principal office address) 6130 BAYLINE DRIVE, PANAMA CITY, FL (Current mailing address) AMUSEMENT RIDE DESIGN, MANUFACTURING, SALES
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) 6136 BAYLINE DRIVE
PANAMA CITY, Florida 32464
(City) (Zip code) Office Address: 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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman: VINCENT PIC-PARIS.			_
Address: 1516 TROUT LANE			- .
PANAMA CITY BEACH, FI			-
Vice Chairman: TEFFREY C. DAVIS			_
Address: 2100 WEST BEACH DRIVE			_
PANAMA CITY, FL 32401			_
Director:			_
Address:			
			_
Director:			_
Address:			_
			-
B. OFFICERS			
President: VINCENT PK-PARIS			_
Address: 1516 TROUT LANE			_
PANAMA C. ty BEACH, FIA			
Vice President: TEFFREY C. DAVIS	TALC III	<u>R</u>	_
Address: 2100 WEST BEACH DRIVE		3	_
PANAMA CITY, FL 32401	88 <u>4</u> -	<u> </u>	
Secretary:	<u> </u>	<u> </u>	_
Address:		<u> 교</u>	_
Treasurer:			_
Address:			_
NOTE: 16.	limantama		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or d			
13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applic	ation)		
14. VICE President			_
(Typed or printed name and capacity of person signing application)			

State of New Hampshire Department of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify HOPKINS RIDES, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on February 15, 2001. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.

TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 22nd day of July, A.D. 2002

William M. Gardner Secretary of State

