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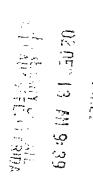
(Requestor's Name)					
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PICK-UP WAIT MAIL					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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TRANSMITTAL LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	ROTAGAMI	TNC. pration - must include suffix)		<u>-</u>
	(Name of corpo	ration - must include surfix)		
Dear Sir or Madam:		ć.		
	e", and check are submitted	n for Authorization to Transact I to register the above referen		
Please return all corresp	ondence concerning this m	natter to the following:		
KOBER	TROGERS			
	(Nan	ne of Person)		
IXVI P. CO.	(Firm	n/Company)	<u> </u>	-
291 BE.	(Firm -HAVEN FALK (A) FL 3476 (City/Se	c Dewe		
WIL DEC	-MAVEN ING	Address)		_
DOSEE	E. 21176	1 "		
OCOEL	(City/Si	tota and Zin code)		- -
	(Outyros	and Esp code)		
For further information concerning this matter, please call:				02 DEC 13
ROBERT RO	GERS at 40	7, 729, 4000		
ROBERT ROGERS at (46)		rea Code & Daytime Telephone Number)		=
			one Number)	7
				ö
STREET ADDRESS: Registration Section		MAILING ADDRESS:		(G)
Division of Corporations Division of Corporations				
409 E. Gaines St.				
Tallahassee, FL 32399		ralianassee, FL 32314	•	
Enclosed is a check for t	the following amount:			
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status	s &c

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

4. 13 MAY 2002
(Date of incorporation)

5. PERPETUAL
(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.) 291 BELHAVEN FALLS DRIVE, OCOEE FL 34761
(Principal office address)

291 BELHAVEN FALLS DRIVE, OCOEE FL 3476/
(Current mailing address) 8. TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH CORPORATIONS MAY BE (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

ORGANIZE 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: ROBERT ROGERS Office Address: 29 BELITAVEN FALLS _______, Florida 34761 (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

(Registered agent's signature)

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.

≥ 12. Names and business addresses of officers and/or directors: A. DIRECTORS KOBERT C. ROGERS JR. Chairman: 291 BELHAVEN FALLS DRIVE OCUEE FL 34761 Vice Chairman: Address: __ Director: Address: Director: **B. OFFICERS** President: ROBERT C. ROGERS TR. Address: 291 BELHAVEN FALLS DRIVE OCOFE, FL 34761 Vice President: Address: Secretary: _ Treasurer: 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. ROBERT C. ROGERS TR. TRESIDE.

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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ROTAGAMI, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF NOVEMBER, A.D. 2002.



3524228 8300

Warriet Smith Windson Secretary of State

PAGE 1

AUTHENTICATION: 2092636

020704039 DATE: 11-15-02