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OSMUN CORPORATION
TALLAHASSEE, FLORIDA

W02-35877
J. BRYAN DEC 26 2002

J. BRYAN DEC 26 2002



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

December 26, 2002

ROSEMARY HOMEISTER
EXCLUSIVE INVESTMENTS, INC.
19383 SW 68TH STREET
PEMBROKE PINES, FL 33332

SUBJECT: EXCLUSIVE INVESTMENTS, INC.
Ref. Number: W02000035877

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for EXCLUSIVE INVESTMENTS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 102A00067420

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXCLUSIVE INVESTMENTS, 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:

ROSEMARY HOMEISTER

(Name of Person)

EXCLUSIVE INVESTMENTS, INC

(Firm/Company)

19383 SW 68TH Street

(Address)

Pembroke Pines, FL 33332

(City/State and Zip code)

For further information concerning this matter, please call:

ROSEMARY HOMEISTER at (954) 205-5626

(Name of Person)

(Area Code & Daytime Telephone Number)

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

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
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RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned WESTON J. COOLIDGE, do hereby certify
(Name)

that this Resolution of the Board of Directors of _____

Exclusive Investments, Inc
(Corporate Name)

a corporation duly organized and existing under the laws of the State of NEVADA

was duly adopted on November 19, 2002.

Be it resolved, that EXCLUSIVE INVESTMENTS, INC,
(Corporate Name)

organized and existing in the State of NEVADA, hereby adopts the name
Exclusive Investments 42, Inc for use in Florida.

Dated: JAN 6, 2003


Signature of either Chairman, Vice Chairman or any officer

WESTON J COOLIDGE CHAIRMAN
Type or print name

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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.

1. EXCLUSIVE INVESTMENTS, 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. NEVADA 3. 46-0510784
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. NOVEMBER 19, 2002 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON Qualification
(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.)
7. 101 CONVENTION CENTER DRIVE, STE 700, LAS VEGAS, NV 89109
(Principal office address)
P.O. BOX 27740, LAS VEGAS, NV 89126
(Current mailing address)
8. SERVICE CONTRACTOR
(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: ROSEMARY HOMEISTER
Office Address: 19383 SW 68TH STREET
PEMBROKE PINES, Florida 33332
(City) (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.

Rosemary Homeister
(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. DIRECTORS

Chairman: WESTON J. COOLIDGE
Address: 4330 So. VALLEY VIEW SUITE 230
LAS VEGAS, NV 89102

Vice Chairman: _____
Address: _____

Director: WESTON J. COOLIDGE
Address: _____

Director: _____
Address: _____

B. OFFICERS

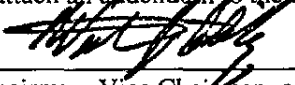
President: WESTON J. COOLIDGE
Address: 4330 So VALLEY VIEW STE 230
LAS VEGAS, NV. 89102

Vice President: _____
Address: _____

Secretary: WESTON J. COOLIDGE
Address: _____

Treasurer: WESTON J. COOLIDGE.
Address: _____

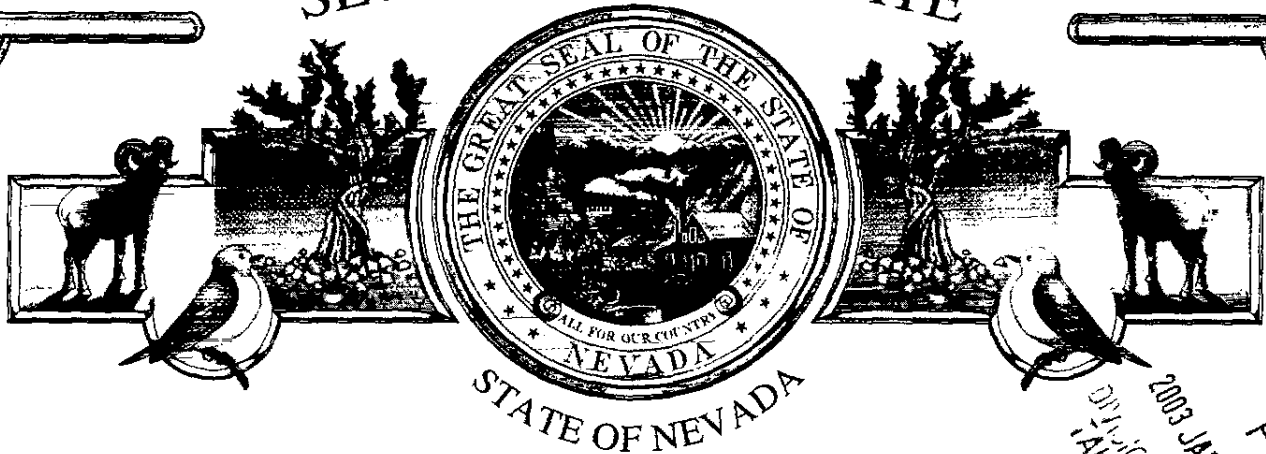
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. WESTON J. COOLIDGE PRESIDENT
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **EXCLUSIVE INVESTMENTS, INC.** as a Corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since **November 19, 2002**, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Las Vegas, Nevada, on **November 19, 2002**.



Dean Heller

Secretary of State

By

Kamlesh Bhardwaj

Certification Clerk

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TALLAHASSEE, FLORIDA