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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

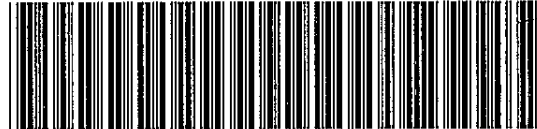
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 FEB 24 AM 11:22

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB 24 PM 1:02

FILED

CT CORPORATION SYSTEM

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
04 FEB 24 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 6036615 SO
Customer Reference 1: 00302.1
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Leisure Invention Corp (C.I.)
Qualification
Florida

Please return a good standing certificate along with regular evidence.

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton
Sr. Fulfillment Specialist
Jeff_Netherton@cch-lis.com

**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. Leisure Inventions, Corp.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Cayman Islands 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 1, 2001 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. P.O. Box 694 GT Edward Street Georgetown, Cayman Islands
(Principal office address)

P.O. Box 694 GT Edward Street Georgetown, Cayman Islands
(Current mailing address)

8. Manufacturing of Amusement Rides and the re-sale of spare parts.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

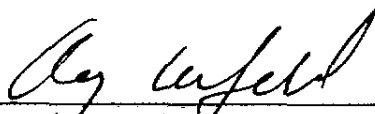
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Roy L. Weinfeld, P. A.

Office Address: One SE 3 Avenue, Suite 2200
Miami, Florida 33131
(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.


(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:

FILED
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: **Peter Raidt**

Address: **8552 SW 169 Terrace**

Miami, FL 33157

Director: _____

Address: _____

B. OFFICERS

President: **Peter Raidt**

Address: **8552 SW 169 Terrace**

Miami, FL 33157

Vice President: _____

Address: _____

Secretary: **Alexander Raidt**

Address: **Schuhstrasse 45 72108 Rottensburg, Germany**

Treasurer: **Christina Raidt**

Address: **8552 SW 169 Terrace Miami, FL 33157**

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. **Peter Raidt**

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

CC-110304

Certificate Of Good Standing

TO WHOM IT MAY CONCERN

I DO HEREBY CERTIFY that

LEISURE INVENTIONS

a company duly organized and existing under and by virtue of the Laws of The Cayman Islands is at the date of this certificate in Good Standing with the office, and duly authorized to exercise therein all the powers vested in the company.

Given under my hand and Seal at George Town in the
Island of Grand Cayman this 4th day of February
Two Thousand Four

Stu Webb
An Authorised Officer,
Registry of Companies,
Cayman Islands, B.W.I.

