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2004 APR 28 P 2:13

SECRETARY OF STATE



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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 9, 2003

JAMES M. PUNCH
895 HALE AVE.
OAKDALE, MN 55128

SUBJECT: ATOMIC PROPS & EFFECTS, LTD. INCORPORATED
Ref. Number: W03000022563

FILED

2004 APR 28 P 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ATOMIC PROPS & EFFECTS, LTD. INCORPORATED. However, the document has not been filed and is being returned for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 803A00066101



FILED

2004 APR 28 P 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 13, 2004

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

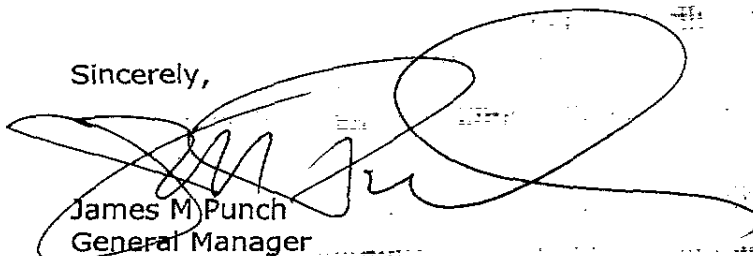
ATTN: Agnes Lunt

Dear Ms Lunt,

Enclosed is an application for registration. We had previously filed with the state last year, but I believe that some of the paperwork was never matched up. We mailed the check in a separate envelope from the application. At this time, I am enclosing a new form and another check for \$70.00 to expedite the processing. I am requesting a refund of our first check.

I have attached the letter we received from you last August. I appreciate your help in getting our filing complete. Please feel free to call me for any reason.

Sincerely,



James M. Punch
General Manager



TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

2004 APR 28 P 2:13

SUBJECT: Atomic Props + Effects, Ltd.
(Name of corporation - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Patricia P. Pearson
(Name of Person)
Atomic Props + Effects, Ltd
(Firm/Company)
895 Hale Ave
(Address)
Oakdale, MN 55128
(City/State and Zip code)

For further information concerning this matter, please call:

Patricia Pearson at (612) 331-1335
(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

See cover letter. Fee already paid.

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.

FILED

1. Atomic Props + Effects, Ltd., Inc. 2009 APR 28 D-2-13
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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TALLAHASSEE, FLORIDA

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

2. Minnesota 3. 41-1625315
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. _____ 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. 895 Hale Ave., Oakdale, MN, 55128
(Principal office address)

SAME
(Current mailing address)

8. Sale of outdoor billboard props
(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: Luis Alberto Acosta

Office Address: 7337 NW 32nd Ave

Miami, Florida 33147
(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.

Luis Alberto Acosta
(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: Michael J Pearson **FILED**
Address: 895 Hale Ave Oakdale MN 55128
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Vice Chairman: Patricia P Pearson
Address: 895 Hale Ave Oakdale MN 55128
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael J Pearson
Address: 895 Hale Ave Oakdale MN 55128

Vice President: Patricia P Pearson
Address: 895 Hale Ave Oakdale MN 55128

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Michael J Pearson
(Signature of Director or Officer listed in number 12 of the application)

14. PATRICIA PEARSON, Vice President
(Typed or printed name and capacity of person signing application)

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

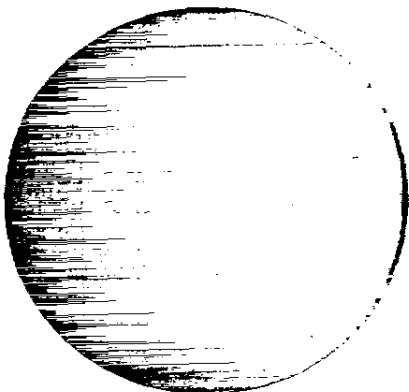
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Atomic Props & Effects, Ltd.

Date Formed: 09/26/1988

Chapter Governed By: 302A

This certificate has been issued on 04/13/04.



Mary Kiffmeyer
Secretary of State.