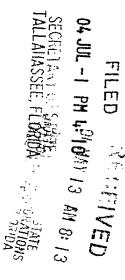


Robert Lafferty (Requestor's Name)	
12664 Mudiale 121	_
(Address) Stan Stan State/Zip/Phone #)	- 10
PICK-UP WAIT MAIL	
Lafferty Enterprises (Business Entity Name) 54-1949047 (Document Number)	J, _
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	



##78.75 ***78.75





TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: hafferty Enterprises Inc. (Name of corporation - must include suffix)
(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:
Robert Laffect
Robert Lafferty (Name of Person)
Lafferty Enterprises The
Latterty Exterprises Inc (Firm/Company)
12664 Mudlake Rd
(Address)
Glen 57. Mary Fl 32040
Glan 54. Mary, Fl 32040 (City/State and Zip code)
For further information concerning this matter, please call:
Robert Lafferty at (904) 673-1714 DE E (Name of Person) (Area Code & Daytime Telephone Number)
904-275-2707
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 & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 22, 2004

ROBERT LAFFERTY 12664 MUDLAKE RD GLEN ST MARY, FL 32040

SUBJECT: LAFFERTY ENTERPRISES INC.

Ref. Number: W04000018402

We have received your document for LAFFERTY ENTERPRISES INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 104A000410707

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. Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Lafferty Enterprise Inc
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Delawase U.S.A. 3. (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 11-13-1995

(Date of incorporation)

5. (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.) 12664 Mudique Road, Glan St. Mary, FJ 3204
(Principal office address) Mudlake Rd Glan St. Mary Fl. 32040 (Current mailing addiess) (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 accepta Name: Robert Lafferty Office Address: 12664 Windlake Jed. Glan St. Mary, Florida 32040 (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

(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

duties, and I am familiar with and accept the obligations of my position as registered agent.

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.

further agree to comply with the provisions of all statutes relative to the proper and complete performance of my

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: _____ Vic e Chairman: Address: Director: Address: _____ Director: __ B. OFFICERS Address: 12664 Vice President: Address: Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LAFFERTY ENTERPRISES 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 THIRTEENTH DAY OF MAY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAFFERTY ENTERPRISES INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF NOVEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

2562494 8300

Darriet Smith Windson Secretary of State

AUTHENTICATION: 3109150

040350735 DATE: 05-13-04