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(Address)
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F05-6932
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SCOTFLAG, TNC. (Name of corpor	
(Name of corpor	ation - must include suffix)
Dear Sir or Madam:	
	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this ma	atter to the following:
FRED A. MCKENZIE JI	2
FRED A. MCKENZIE JI	e of Person)
SCOTFLAG. INC.	
Scotflag, TNC. (Firm	/Company)
2506 CYPRESS BER	
CLEARWATER F	ELA 3376/ ate and Zip code)
(Ćity/St	ate and Zip code)
For further information concerning this matter, plea	se call:
FRED MCKENZIE at (72	17 204-3770
FRED McKENZIE at (72 (Name of Person) (As	rea Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\times \text{Certificate of Status}\$	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

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 BUSTNESS IN THE STATE OF FLORIDA. Scotflag, Inc.
(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) WEVADA
(State or country under the law of which it is incorporated)

3. 59-3380288
(FEI number, if applicable) 4. 4-22-1996

(Date of incorporation)

5. Perpetuke

(Duration: Year corp. will cease to exist or "perpetual") APRIL 1, 2005
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) CYPIESS BOUD Dr. W. CLEARWATER FLA 33761
(Principal office address) Same —
(Current mailing address) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) FRED A. MCLENZIE IL Name: 2506 CYPIESS BEND Dr W

CLEARWATER , Florida 33761
(City) (Zip code) Office Address: 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 argnatuse)

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:

	FRED A. McKE					
ddress:	2506 CYPERS	Beno	Dr. W.		<u></u>	tx
	CLEARWATER	FLA	33761			
	un:					
Address:		·····	<u> </u>		- *	·
			<u> </u>		- <u>-</u> <u>-</u>	
Director:	SANDRA L. M	CKENZIE	<u> </u>			
Address:	SAME AS A	Bove				
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Director:			<u> </u>			
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ddress:	SAME AS					
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lice Presider	ıt:					
lice Presider						
/ice Presider Address:	ıt:					
/ice Presider Address: Secretary:	SANDRA L. MC	VAVZ16				
Vice Presider Address: Secretary:	SANDIA L. MC SAME AS	KAUZIE ABOVE				
Vice Presider Address: Secretary: Address: Treasurer:	SANDRA L. MC SAME AS	KAUZIE ABOVE				
Vice Presider Address: Secretary: Address: Freasurer:	SANDIA L. MC SAME AS	KAUZIE ABOVE				
Vice Presider Address: Secretary: Address: Freasurer: Address:	SANDRA L. MC SAME AS	KAUZIE ABOVE				
Vice Presider Address: Secretary: Address: Freasurer: Address:	SANDRA L. MC SAME AS	ABOVE	application listin	g additional office	ers and/or direc	

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

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, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts 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, SCOTFLAG, 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 April 22, 1996, 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 on November 16, 2005.

DEAN HELLER Secretary of State

Certification Clerk