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TALCHER SELE, TEORIOR

TO: Registration Section
Division of Corporations

SUBJECT: <u>RAHAMA NEVELOPMENT, INC.</u>

(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:

Thomas T McKinn'te

(Name of Person)

(Firm/Company)

P.O. Box 4591

(Address)

Fort Walton Beach, Fl 32549

(City/State and Zip code)

For further information concerning this matter, please call:

Thomas T Mckinnite

at (850) 803-/243

(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

## 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.

"lnc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	PORATED," "COMPANY," "CORPORATION,"	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
NAVADA	3.	
State or country under the law of which it is incorporate	orated) 3 (FEI number, if applicable)	
April 17 2006	5.	
(Date of incorporation)	5. (Duration: Year corp. will cease to exist or "perpetual")	
	ation has not transacted business in Florida, insert "upon qualification.")	
539 Bob Sikes Buld suite #15 (Principa 539 Bob Sikes Buld suite #1		
(Current	mailing address)	
	mailing address)  ne state or country to be carried out in state of Florida)	
(Purpose(s) of corporation authorized in hom		
(Purpose(s) of corporation authorized in hom	ne state or country to be carried out in state of Florida)  ed agent: (P.O. Box or Mail Drop Box NOT acceptable)	
(Purpose(s) of corporation authorized in hom  Name and street address of Florida registered  Name: Thomas T McKinnie	ne state or country to be carried out in state of Florida)  ed agent: (P.O. Box or Mail Drop Box NOT acceptable)	
(Purpose(s) of corporation authorized in hom  Name and street address of Florida registered  Name: Thomas T McKinnie	ne state or country to be carried out in state of Florida)  ed agent: (P.O. Box or Mail Drop Box NOT acceptable)	
(Purpose(s) of corporation authorized in hom  Name and street address of Florida registere  Name: Thomas T McKinnik  fice Address: 539 Bob Sikes BVIL	ne state or country to be carried out in state of Florida)  ed agent: (P.O. Box or Mail Drop Box NOT acceptable)	

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.

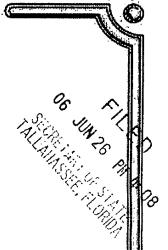
Thomas & Mekinnel
(Registered agent's signature)

- 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	BEGGG SUNZED
Chairman:	"(A)(1305 PH)
Address:	
Vice Chairman:	
Address:	
Director: Thomas I Mckinnie	
Address: 1976 Seagrape Dr Nava (mailing) P.O. Box 4591	rre Fl 32566 Fort Walton Bch, Fl 32549
Director:	
Address:	
B. OFFICERS  President: Derrick L. Mekinnik  Address: 742 Buffer Drive For	rt Walton Bch, Fl 32548
Vice President:	
Address:	
Secretary: Richie L. Mckinnie	
Address: 134 Edna Drive Crosty	'ew, Fl 32536
Treasurer: Ron A. Mckinnie	
Address: 539 Bob Sikes Buin #	16 Fort Walton Bch, Fl 32547
off Amilia	dum to the application listing additional officers and/or directors.
Signature of Director or Office  14. Thomas T MeLinic	er listed in number 12 of the application)
	e 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, BAHAMA DEVELOPMENT, 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 17, 2006, 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 April 20, 2006.

DEAN HELLER Secretary of State

By O

Certification Clerk