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Office Use Only

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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: GOLF PROJECT MANAGEMENT SERVICES, INC.				
(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:				
GENE BATES				
(Name of Person)				
GOLF PROJECT HANAGEMENT SERVICES INC.				
(Firm/Company)				
5606 PGA BLVD SUITE III				
(Address)				
PALM BEACH GARDENS, FL 33418				
(City/State and Zip code)				
For further information concerning this matter, please call:				
GENE BATES at (561) 281-3550				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations 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 Certificate of Status & Certified Copy				



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 14, 2006

GENE BATES GOLF PROJECT MANAGEMENT SERVICES, INC. 5606 PGA BLVD SUITE 111 PALM BEACH GARDENS, FL 33418

SUBJECT: GOLF PROJECT MANAGEMENT SERVICES, INC.

Ref. Number: W06000031409

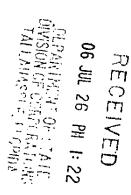
We have received your document for GOLF PROJECT MANAGEMENT SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist

Letter Number: 006A00045447



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 60 F F	ROJECT MANAGEMENT	SFRUMPS I	r. g.
	rporation; must include "INCORPORATED," "C rp," "Inc," "Co," or "Corp.")		N," PEG
(If name unavaila	ble in Florida, enter alternate corporate name adop	ted for the purpose of transaction	ng business in Florida)
2. UTXH (State or country u	nder the law of which it is incorporated)	20 - 466499 (FEI number, if app	S9 (a)
	ER 10, 2005 5. (Du	PERPETUAL ration: Year corp. will cease to	p exist or "perpetual")
6.	~/A-		
	(Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, F	S.S., to determine penalty liabil	
7. 560	(Principal office address)	M BEACH GARDE	NS FL 33418
	(Principal office address)		/
560	(Current mailing address)	ALM BEACH GAL	200NS FZ 33418
	(Current mailing address)	·	
(Purpose(s) ORGANIZ	E IN ANY LAWFUL AT OR ACT of corporation authorized in home state or country ED UNDER THE UTAH RE	to be carried out in state of Flo	orida)
9. Name and street	address of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name:	GENS BATES		75 6 of .
Office Address:	5606 PGA BUD. STEIL		
	PALM BEACH GARDENS (City)	, Florida <u>33418</u> (Zip code)	2.6 PU
10. Registered age	ent's acceptance:		To N
designated in this a further agree to col	d as registered agent and to accept service of application, I hereby accept the appointment of amply with the provisions of all statutes relative with and accept the obligations of my position	as registered agent and agre we to the proper and complet	re to act in this capacity. I
	Gener Botos		
	(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: __ Address: _ Vice Chairman: Address: Director: Address: _ Director: **B. OFFICERS** President: GENE RATE SUITE Address: 5006 Vice President: ANDLEW Address: <u>500</u>0 Secretary: Address: Treasurer: Address: ___ 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)

PRESIDENT

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

GENE BATES -



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849

Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

June 23, 2006

DOUG BAXTER
P.O. BOX 35
PROVO, UTAH 84603-0035

CERTIFICATE OF EXISTENCE

Registration Number:

6076365-0142

Business Name:

GOLF PROJECT MANAGEMENT SERVICES, INC.

Registered Date:

DECEMBER 16, 2005

Entity Type:

CORPORATION-DOMESTIC-PROFIT

Current Status:

GOOD STANDING

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division; and, that Articles of Dissolution have not been filed.

Kathy Berg



Kathy Berg

Director

Division of Corporations and Commercial Code