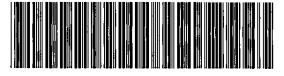
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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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FEB 23

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Drive, Suite A Tallahassee, FL 32301 PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE: 02/20/07	
NAME: GC & D Enterprises, Inc	,
TYPE OF FILING: application to transact	basiness
COST: ch for 78-75 attached RETURN: Good Standing	07 FE3
RETURN: Office Colored	21 M 8:
ACCOUNT: FCA000000015	ATE ATE
AUTHORIZATION: ABBIE/PAUL HODGE	Hotel -
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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. GCED Enterprises, Inc. "
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") The Ole Wood Cuttee INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 14-1984630 (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 05 Industrial Park Drive, Hollister, Mo 65672
(Principal office address) 20 Box 1169, Hollister, MO 65673
(Current mailing address) Production & selling of woodnames e plagues at Busch Gardens
(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 NOT acceptable) Florida Filing & Search Services Inc Tallahasee, Florida 3230/
(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.

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:	- M
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Gary W. Camp	07 I
President: Gary W. Camp Address: 551 Fair lawn Drive Hollister, Mo 65672	FEB 7
Hollister, mo 65672	SSE 21
Vice President:	
Address:	- : 3 - : 3 - : 3 - : 3
	>
Secretary: Carrie Camp	
Address: 551 Fairlaun Delve, Hollister, mo	65672
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers are	
(Signature of Director or Officer listed in number 12 of the application)	

Carrie Camp, Secretary
(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

GC&D ENTERPRISES, INC. 00779844

was created under the laws of this State on the 30th day of November, 2006, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 15th day of February, 2007

n Camalan

Secretary of State

