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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Carrie Bryan GAVE

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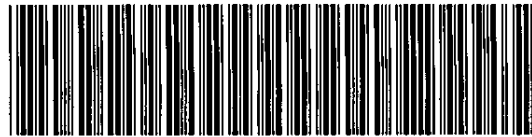
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DATE

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5/25/05
MRD

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RECEIVED
07 MAY 24 AM 11:28
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED
07 MAY 24 PM 12:42
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

MRD
5/25

May 24, 2007

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 6934298 SO
Customer Reference 1: None Given
Customer Reference 2: N/A

Dear Department of State, Florida:

Please obtain the following:

GTP Kramera, Ltd (NV)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com

**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. GTP KramERICA, Ltd. Co.
(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)

2. Nevada 3. 41-2106997
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 27, 2003 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5500 Bentgrass Dr., Sarasota, FL 34235
(Principal office address)
5500 Bentgrass Dr., Sarasota, FL 34235
(Current mailing address)

8. Conduct Surveys
(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)

Name: Anthony Peradotti

Office Address: 5500 Bentgrass Dr.

Sarasota, Florida 34235
(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 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.

Anthony Peradotti
(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:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Anthony D. Peradotti

Address: 5500 Bentgrass Dr.

Sarasota, FL 34235

Director: _____

Address: _____

B. OFFICERS

President: Anthony D. Peradotti

Address: 5500 Bentgrass Dr.

Sarasota, FL 34235

Vice President: _____

Address: _____

Secretary: Anthony D. Peradotti

Address: 5500 Bentgrass Dr., Sarasota, FL 34235

Treasurer: Anthony D. Peradotti

Address: 5500 Bartgrass Dr., Sarasota, FL 34235

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Anthony Peradotti*

(Signature of Director or Officer listed in number 12 of the application)

14. _____

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

SECRETARY OF STATE



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TALLAHASSEE, FLORIDA

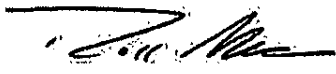
CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, **GTP KRAMERICA, LTD.**, 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 June 27, 2003, 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 May 23, 2007.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20070523-1818
You may verify this electronic certificate
online at <http://secretaryofstate.biz/>