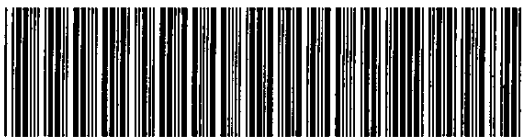


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 AUG -8 P 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG - 8 2007

LR
LECLAIR RYAN

A Professional Corporation

951 East Byrd Street
Riverfront Plaza, East Tower
Richmond, Virginia 23219
804.783.2003

ATTORNEYS AT LAW

P. Lynn Hayes
Paralegal
lhayes@leclairryan.com

Direct Dial: 804.783-7561
Direct Fax: 804.783-2294

August 7, 2007

VIA FEDEX

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**Applications By Foreign Corporations
To Transact Business in Florida**

Dear Sir or Madam:

Enclosed please find two Applications By Foreign Corporation for Authorization to Transact Business in Florida and Cover Sheets for the following entities. Two company checks, each in the amount of \$70, are enclosed.

1. LaserNation Equipment Corporation, a Delaware corporation. A Certificate of Existence from the State of Delaware is attached to the Application.
2. LaserNation Franchising Corporation, a Delaware corporation. A Certificate of Existence from the State of Delaware is attached to the Application.

Please return the recorded evidence to me in the enclosed FedEx envelope which includes a pre-addressed and pre-paid airbill.

If you have any questions, please call me at (804) 783-7561.

Sincerely,



P. Lynn Hayes
Paralegal

Enclosures
3673944

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LaserNation Equipment Corporation
(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:

Lynn Hayes, Paralegal

(Name of Person)

LeClair Ryan, A Professional Corporation

(Firm/Company)

951 East Byrd Street

(Address)

Richmond, Virginia 23219

(City/State and Zip code)

For further information concerning this matter, please call:

Lynn Hayes

(Name of Person)

at (804) 783-7561

(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
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.

1. LaserNation Equipment Corporation
(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. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/25/2005 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Not applicable
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 45662 Terminal Drive, Suite 110, Dulles, Virginia 20166
(Principal office address)
45662 Terminal Drive, Suite 110, Dulles, Virginia 20166
(Current mailing address)

8. To provide laser tag equipment
(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: William S. Edwards

Office Address: 2081 Northwest 118th Avenue

Plantation, Florida 33323
(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.

William S. Edwards

By: William S. Edwards
(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:

FILED
1001 AUG -8 P 1:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

A. DIRECTORS

Chairman: _____

Address: _____

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Vice Chairman: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Director: William S. Edwards

Address: 45662 Terminal Drive, Suite 110

Dulles, Virginia 20166

Director: Gary Reese

Address: 45662 Terminal Drive, Suite 110

Dulles, Virginia 20166

B. OFFICERS

President: William S. Edwards

Address: 45662 Terminal Drive, Suite 110

Dulles, Virginia 20166

Vice President: Gary Reese

Address: 45662 Terminal Drive, Suite 110

Dulles, Virginia 20166

Secretary: Gary Reese

Address: 45662 Terminal Drive, Suite 110, Dulles, Virginia 20166

Treasurer: William S. Edwards

Address: 45662 Terminal Drive, Suite 110, Dulles, Virginia 20166

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

13. *William S. Edwards*
(Signature of Director or Officer listed in number 12 of the application)

14. *William S. Edwards President*
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

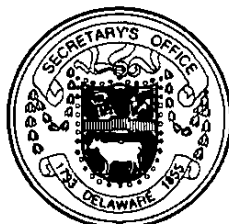
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LASERNATION EQUIPMENT CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF JULY, A.D. 2007.

FILED
2007 AUG -8 P 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4021195 8300

070836004



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5861174

DATE: 07-20-07