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FOREIGN PROFIT/NONPROFIT CORPORATION

Safe Ride Solutions, Inc.

Certificate of Status	1
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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.**

1. Safe Ride Solutions, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

N/A
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. State of Idaho 3. 20-8380408
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. February 6, 2007 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2747 West Wind Drive, Eagle, Idaho 83618
(Principal office address)
2747 West Wind Drive, Eagle, Idaho 83618
(Current mailing address)
8. provides transportation services to professional athletes.
(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: NRAI Services, Inc.
Office Address: 2731 Executive Park Dr., Ste 4
Weston, Florida 33331
(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.

NRAI Services, Inc.

Andrea Stark

(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Gary Lawrence - President

Address: 2410 Ridge View Drive, San Diego, California 92105

Vice President: Lorenzo Neal - Vice President

Address: 372 South Eagle Road #346, Eagle, Idaho 83616

Secretary: Matthew Mahoney - Secretary

Address: 2747 West Wind Drive, Eagle, Idaho 83616

Treasurer: Matthew Mahoney - Treasurer

Address: 2747 West Wind Drive, Eagle, Idaho 83616

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Matthew Mahoney - Secretary/Treasurer
(Typed or printed name and capacity of person signing application)

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State of Idaho

Office of the Secretary of State

**CERTIFICATE OF EXISTENCE
OF
SAFE RIDE SOLUTIONS, INC.**

File Number C 171359

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that I am the custodian of the corporation records of this State.

I FURTHER CERTIFY That the record of this office show that the above-named corporation was incorporated under the laws of Idaho on February 5, 2007.

I FURTHER CERTIFY That the corporation is in goodstanding on the records of this office.

Dated: August 29, 2007



Ben Yursa
SECRETARY OF STATE

By *[Signature]*

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