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| Special Instructions to Filing Officer: |
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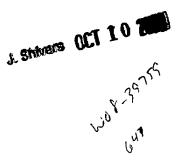
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COVER LETTER

| TO: New Filing Section Division of Corporations |
|--|
| SUBJECT: EMBROIDERY CAM CORP. |
| (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: |
| GUSTAVO CAM (Name of Person) |
| (Name of Person) |
| EMBROIDERY CAM CORP. |
| (Firm/Company) |
| 16205 SW 117 AVE UNIT. 22 3 3 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 |
| (Address) |
| MIAMI - FLORIDA - FL 33/77 |
| (City/State and Zip code) |
| For further information concerning this matter, please call: |
| GUSTA VO CAM at 786, 853-2398 // 305-256-9990 |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| STREET/COURIER ADDRESS: MAILING ADDRESS: |
| New Filing Section New Filing Section |
| Division of Corporations Clifton Building Division of Corporations P.O. Box 6327 |
| 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: |
| \$70.00 Filing Fee \$78.75 Filing Fee & S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status & 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. EMBROIDERY CAM CORP. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "!nc.." "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) NEW YORK

(State or country under the law of which it is incorporated)

(FEI number, if applicable) (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. 16205 SW 117 AVE. UNÎT 22 - MÎDMI - FL 33177

(Principal office address)

16205 SW 117 DVE. UNÎT 22 - MÎDMI - FL 33177

(Current mailing address) E. TO HAVE A OFFICE & STOND 6E FOR MORE BUSINESS (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) CESAR HERRERA Name: 4849 SW 152 COURT UNIT F

MIAMI , Florida 33/85

(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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: __ Address: ___ Vice Chairman: Address: ___ Address: ____ **B. OFFICERS** President: GUSTAVO CAM Address: 16.205 SW 117 AVE. UNIT "22". Vice President: Address: ___ Treasurer: NOTE: If necessary, you may attach au mattendum to the application listing additional officers and/or directors.

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

GUSTAVO CAM

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

13. _____

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of EMBROIDERY CAM CORP. was filed on 05/04/2005, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.

I further certify, that no other documents have been filed by such Corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this, 10th day of September two thousand and eight.

Special Deputy Secretary of State

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