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Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION
Rooster Custom Cycles Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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DIVISION OF CORPORATIONS
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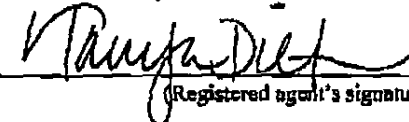
01-681-100

**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. Rooster Custom Cycles, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Washington 3. 26-3595761
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/20/2008 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2823 S. Craig Road, Airway Heights, WA 99001
(Principal office address)
P.O. Box 3703 Spokane, WA 99220-3703
(Current mailing address)
8. Manufacture motorcycles
(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.



(Registered agent's signature) Tanya Dietrich, Asst. Secretary

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: NoneAddress: _____

Director: _____

Address: _____
_____**B. OFFICERS**President: Juston P. RouseAddress: P.O. Box 3703 Spokane, WA 99220-3703
_____Vice President: John P. RouseAddress: P.O. Box 3703 Spokane, WA 99220-3703
_____Secretary: Karma K. RouseAddress: P.O. Box 3703 Spokane, WA 99220-3703
_____Treasurer: Karma K. RouseAddress: P.O. Box 3703 Spokane, WA 99220-3703

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

13. Karma K. Rouse

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

14. Karma K Rouse, Secretary/Treasurer

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

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TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of Washington

Secretary of State

I, **SAM REED**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
ROOSTER CUSTOM CYCLES, INC.

I **FURTHER CERTIFY** that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 10/20/2008.

I **FURTHER CERTIFY** that as of the date of this certificate, **ROOSTER CUSTOM CYCLES, INC.** remains active and has complied with the filing requirements of this office.

Date: January 28, 2010

UBI: 602-872-120



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed

Sam Reed, Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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