F9800003058 TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section Division of Corporations	
- /	USA Incorporated - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation Florida", "Certificate of Existence", and check as foreign corporation to transact business in Florida.	on for Authorization to Transact Business in e submitted to register the above referenced a.
Please return all correspondence concerning this	matter to the following:
Ree #	1000025409315 -05/29/9801074001 ******78.00 ******70.00
First Ca	of Person) Lompany) Lompany)
5030 Champion Blup (Ad	Suite 6403
BOLA RAYON, F	C 33 496 (State/Zip)
Should you need to call someone concerning this (Name of Person)	/,
COURIER ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399	Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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. (Name of corporation: must include the word "INCORPORATED", COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (FEI number of applicable) (State or country under the law of which it is incorporated) (Duration: Year corp. will cease to exist or "perpetual") business in Florida (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.) Current mailing address) 0/0mnusica 1005 (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Office Address: 5030 Chamflon Blub Suite 6403 , Florida, 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)

NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Tennis 5346 Address: BLL FL 33484 Vice Chairman: _ Address: Director: Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: CN Address: Delkay Bub, FC 33496 Vice President: __ Address: Secretary: ___ Address: Treasurer: _ Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors/ (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Typed or printed name and capacity of person signing application)

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box

Secretary of State

* Corporations Division
Suite 315, West Tower
2 Martin Tùther King Ir. Ar.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 981380997
CONTROL NUMBER : 9818636
DATE INC/AUTH/FILED: 05/13/1998
JURISDICTION : GEORGIA
PRINT DATE : 05/18/1998

FORM NUMBER : 211

SCOTT KAYE 101 MARIETTA TOWER, STE 3412 ATLANTA GA 30303 SECRETARY OF STATE DIVISION OF CORPORATIONS

98 MAY 29 PM 2: 24

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

FIRST CALL USA, INCORPORATED A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

LEWIS A. MASSEY

SECRETARY OF STATE

