To: Qualification/Tax Lien Section Of the Control o

Division of Corporations	
SUBJECT: F & W Ride Company,	Inc.
	ation - must include suffix)
Dear Sir or Madam:	0000026520909 -09/30/9801033003
The enclosed "Application by Foreign Corporation "Certificate of Existence", and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida", ****** 78. 75 to register the above referenced foreign corporation to
Please return all correspondence concerning this ma	tter to the following:
	1. Esq.
•	ills & Dye, P.A.
	(Company)
779 Avery Blvd.	North, Ste. 200
(A	address)
Ridgeland, MS	
(City/	(State/Zip)
Should you need to call someone concerning this matter, please call:	
James H. Gabriel at (601	L) 957-2600
(Name of Person) (A	rea Code & Daytime Telephone Number)
COURIER ADDRESS:	MAILING ADDRESS:
Ovalification/Tay Lion Spatian	O all of the state of the

Qualification/Tax Lien Section 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.	F	& W Ride Company, Inc.		
	words or abbrev	oration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or viations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.)		_
2.		sissippi 3. $64-073628$ y under the law of which it is incorporated) (FEI number, if applicable)	6	_
4.	Decemb	per 12, 1986 5 99 years (2085)		
6.	·	the of incorporation) (Duration: Year corp. will cease to exist or "perpete	ıal")	
v.		st transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)		_
7.	Pos	t Office Box 6747 ₹	98	_
	Jac	kson, MS 39282-6747	SEP	-11
8.	To pro	(Current mailing address)	30 AH	
٠.	(Purpose((s) of corporation authorized in home state or country to be carried out in state of Florida) reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	. 2 6	Leo
	Name:	Steve Jones	•	
Of	fice Address:	211 South Dale Mabry Hwy.		
	-	Tampa , Florida, 33609 (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.

(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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

Chairman:	James Michael Williams
	250 Farrow Dr.
	Jackson, MS 39212
	Terry P. Foreman
	250 Farrow Dr.
	Jackson, MS 39212
	Michael A. Sievers
Address:	250 Farrow Dr.
·	Jackson, MS 39212
Director:	
Address:	
	70.8
	(Street address only - P.O. Box NOT acceptable)
President:	James Michael Williams
Address:	250 Farrow Dr.
	Jackson, MS 39212
Vice President:	Terry P. Foreman
Address:	250 Farrow Dr.
	Jackson, MS 39212
Secretary:	Michael A. Sievers
-	250 Farrow Dr.
7 Marcoss	Jackson, MS 39212
Treasurer:	··
Address:	
NOTE: IS-	ssary, you may attach an addendum to the application listing additional officers and/or directors.
	Seary, you may attach an addengtum to the applicated institute additional officers and/or directors.
13	(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)

State of Mississippi

Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on December 12,1986 the state of Mississippi issued Charter/Certificate of Authority to:

F & W RIDE COMPANY, INC.

That the state of incorporation is MISSISSIPPI.

THAT THE PERIOD OF DURATION IS 99 YEARS.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

STATE OF STA

Given under my hand and seal of office September 18,1998

ERIC CLARK, Secretary of State