To:

Tallahassee, FL 32399

Qualification/Tax Lien Section

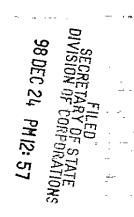
Division of Corporations		· · · · · · · · · · · · · · · · · · ·	
SUBJECT: Corporate FUND (Name of corporation)	in 6 Internet on - must include suffix)	ional, Inc.	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	Authorization to Transact Busi register the above referenced for	ness in Florida", reign corporation to	
Please return all correspondence concerning this matter	r to the following: -12	027226085 /24/98-01102-001 ****78.75 *****78.75	
` <u> </u>	ding Internation	onal, Inc.	
23155 L'Ermitage Circle (Address)			
BOCA RATON FLA-33433			
(City/Sta	ate/Zip)	986 31AIC	
Should you need to call someone concerning this matter	er, please call:	EORETARY SION OF CO	
Name of Person) at (561) (Area) 417- 58 Code & Daytime Telephone N	PN 12: 57	
STREET ADDRESS:	MAILING ADDRESS:	p12/2	
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St.	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327	n.	

Tallahassee, FL 32314

Dec-23rd 1998

Dear Sir Modam: Enclosed you will find a transmittal Letter, application. Original certificate g Existence for Corp. Funding luttluc. and a check in the aut. for \$78.75 Please forward paperwork in the endosed ariborne Expres overright Ewelope and happy holidays Thank You Smedly 1 Videa Josel

Vidia Vogel 23155 d'Ernitage Cui boca latar 21-33433 561-417-8618



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. (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.) (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 or Mail Drop Box NOT acceptable) 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. (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)	
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: JAMes J. Vogel	
Address: 23155 L'ERMitage Circle	
BOCA PATON FIA 33433	
	· · · · · ·
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
	36 S S
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	CRE SION
President: JAMES VOGE	2 PAF
Address: 23155 L'ERMitage Circle	2 200 2 200
BOCA RATON, FLA 33433	\$77 987 987
· • · · · · · · · · · · · · · · · · · ·	5 7
Vice President:	(73
Address:	
1.0	
Secretary: VIDIA B. VOGEL	
Address: 23155 L'ERMITAGE CIVELE	
SOCA RATON, FLA 33455	
Treasurer: JAMES Vogel	
Address: Some Addus as about	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direct	etors.
NUTE: If necessary, you may attach an addengum to the application fishing additional officers allow the	
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	on)
1/ EDIAB. VOGEL	
(Typed or printed name and capacity of person signing application)	



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CORPORATE FUNDING INTERNATIONAL**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 24, 1996, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on December 4, 1998.

Secretary of State

Certification Clerk