FQQDDDDDD5370

-	n of Corpor	ations							
SUBJECT:	SC EN	CUMBRANCE (CORP.						
		(Nam	e of corpora	tion - must incl	ude suffix)				
Dear Sir or Mad	dam:			*	30	-10	0 301 1/15/99- ****87.5	6183 -01059- 0 ****	(—— 7 -013 •87.50
The enclosed "A "Certificate of E to transact busing	Existence",	and check are	-						
Please return all	l correspond	lence concern	ing this mat	ter to the follow	wing:				
	Patrio	k T. Kaeme	rle						
				of Person)			_		
			(Firm/C	Company)					
	7 Cc	rporate Pl	aza						
			(Ad	dress)				•	
	Newp	ort Beach,	CA 92660)					
•			(City/S	tate/Zip)					
Should you need	d to call son	neone concerr	ning this mat	ter, please call	:				
Patrick T. F	Kaemer1e		949 at (719	9-7212	. =	SEC	99	<i>≟</i>
(Name	of Person)		(Area	a Code & Dayti	me Telepho	ne Nun	RETARY O	OCT 15	1
STREET ADDI	RESS:			MAILING	ADDRESS	S:	FSTA	æ E B	
Qualification/Ta Division of Corp 409 E. Gaines St Tallahassee, FL	orations t.	ion		Division of P.O. Box 63	on/Tax Lien Corporation 327 c, FL 32314	ns	TE 14	-	·
Enclosed is a che	eck for the	following amo	ount:						
□ \$70.00 Filing	Fee 🗇	\$78.75 Filing Certificate of		S78.75 Filin Certified Co	_	Ce	.50 Filing	f Status &	

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. SC ENCUMBRANCE CORP.
(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.)

2. NEVADA

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

4. 10-11-99

(Date of incorporation)

5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")

6. 10-19-99
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. Corporate Plaza

8.	Real Estate Ownership							
	(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)							
	Name: Igor M. Olenicoff							

(Current mailing address)

Newport Beach, CA 92660

1062 Coral Ridge Drive

Coral Springs

Florida, 33071

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10. Registered agent's acceptance:

Office Address:

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. DIRECTO	ORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	Igor M. Olenicoff	the second secon
Address:	1062 Coral Ridge Drive	
	Coral Springs, FL 33071	
Vice Chairma	n:	
Address:		
Director:	Andrei Olenicoff	en e
	7 Corporate Plaza	. m 1 . shin an
	Newport Beach, CA 92660	
Director:		
Address:		
B. OFFICE	ERS (Street address only - P.O. Box NOT acceptable)	
President:	Andrei Olenicoff	
Address:	7 Corporate Plaza	
<u> —</u>	Newport Beach, CA 92660	
Vice Presiden	nt:	
Address:		TALL I
		AR OR
Secretary:	Igor M. Olenicoff	15 15 15 15
Address:	1062 Coral Ridge Drive	
	Coral Springs, FL 33071	ATE AND A
Treasurer:	Andrei Olenicoff	
Address:	7 Corporate Plaza	
	Newport Beach, CA 92660	
NOTE: If I	necessary, you may attach an addendum to the application listing addit	tional officers and/or directors.
13.	(Signature of Chairman, Vice Chairman, or any officer listed in r	number 12 of the application)
	(Signature of Chairman, Vice Chairman, or any officer listed in Andrei Olenicoff, President	Intition 17 or me apparatus
14	(Typed or printed name and capacity of person	signing application)

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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, **SC ENCUMBRANCE CORP.,** 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 October 11, 1999, and is in good standing in this state.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on October 12, 1999.

Secretary of State

By

Certification Clerk