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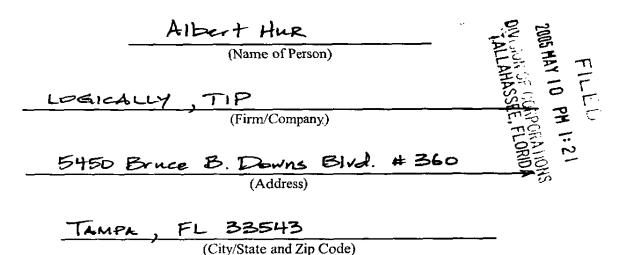
TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAGICALLY DUCKS, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

Albert Hur	at (941) 650 - 5743
(Name of Person)	(Area Code & Daytime Telephone Number

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy

Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

MAGICALLY DI (Nar CALIFORNIA isdiction under the law of which for	icks LLC	132.	
(Nar	ne of Foreign Limited Lia	ibility Company)	
CALIFORNIA	3.	20 - 1543 (FEI number	3062
ipany is organized)			*
6/9/04	5.	PERPETUA	Lability company will cease to
(Date of Organization)		(Duration: Year limited li exist or "perpetual")	ability company of cease to
(See sections (608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability	NASSAHA SOCIAL
5450 BRUCE B			
TAMPA, FL 33	3543		ESS.
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Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the	he Limited L	iability Compa	ny is:			
MAGICAL	LY DI	icks L	- <u>c</u>			
2. The name and	the Florida s	street address o	f the registere	ed agent	and office are:	TOUR MA
	ALBE	RT HUR				最后
(Name)					EL JOR SSEE	
	5450	BRUCE	B Do	NNS	#360	PORP
-	Fl	orida Street Addre	ess (P.O. Box N	IOT ACCE	PTABLE)	21
	-12	buspA	FL	33	543	- T
_			City/State/Zi	р		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

State of California

Secretary of State



CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the 9th day of June, 2004, MAGICALLY DUCKS, LLC, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

> IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 9, 2005.



BRUCE McPHERSON Secretary of State