

To: Registration Section Division of Corporations	
SUBJECT: Power Trips, Ltd. (Name of corpo	ration - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence", and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida", I to register the above referenced foreign corporation to
Please return all correspondence concerning this m	atter to the following: 0000030679609 ******70.00 ******70.00
	*****70.00 *****70.00
Dennis Drose	ne of Person)
TowerTrips, Ltd	n/Company)
4225 Hiaustha	Avenue W99-2883
	Address) W99-2883
Minner die M	N 55406 y/State/Zip)
(Cit	y/State/Zip)
Should you need to call someone concerning this r	And the second
Dennis Brose at 6	Area Code & Daytime Telephone Number)
(Name of Person)	Area Code & Daytime Telephone Number) 💀 🚉
	Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\Bigcirc \text{T} \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

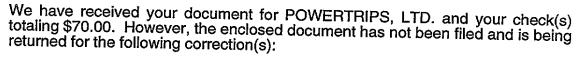


FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 17, 1999

DENNIS BROSE POWERTRIPS, LTD 4225 HIAWATHA AVE. MINNEAPOLIS, MN 55406

SUBJECT: POWERTRIPS, LTD. Ref. Number: W99000028833



The use of LIMITED or LTD. is not acceptable as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt Document Specialist

Letter Number: 499A00059323



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. Power Trips, Ltd., Incorporated (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.) (State or country under the law of which it is incorporated)

3. 41-1917215

(FEI number, if applicable) Sept. 2, 1998

(Date of incorporation)

5. | Perpetual (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) Short term sportscer vental
(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: 3115 La Costa Circle, Ste. 106 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. Mary Treytow
(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 business addresses of officers and/or directors:								•	
A. DIRECTORS									
Chairman:									· - ·
Address:	4225	Hiawatha	Avenue,	Minneapolis,	MY	55406			
Vice Chairman:									• ••••
Address:	<u></u>								.
Director:									•
Address:									
Director:						, , , , , , , , , , , , , , , , , , , ,			
Address:	<u></u>								
B. OFFICERS								ट्ड	
President:						 	80	X 2	=
Address:	м.						======================================		<u>.</u> .
Vice President:								<u> </u>	
Address:							00	25°	
Secretary:									,
Address:								***	
Freasurer:	,					79.			· <u>-</u> -
Address:									
NOTE: If necessary, you	16	7	-	on listing additional	officers		s.		- <u>-</u> -
	nnis Bro	se - Pr	esident &					-	

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

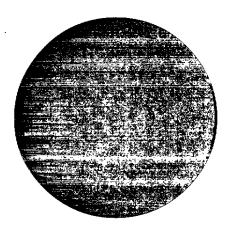
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: PowerTrips, Ltd.

Date Formed: 09/02/1998

Chapter Governed By: 302A

This certificate has been issued on 12/08/99.



Mary Kiffneyer
Secretary of State.