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| Special Instructions to Filing Officer: |
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Office Use Only



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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| SUBJECT: SPORTS JOURNEYS, INC. | |
| | ne of corporation - must include suffix) |
| Dear Sir or Madam: | |
| | for Authorization to Transact Business in Florida", "Certificate of above referenced foreign corporation to transact business in Florida. |
| Please return all correspondence concerning this ma | tter to the following: |
| LESL | IE ANDREWS |
| | (Name of Person) |
| SPORTS | JOURNEYS, INC. |
| | (Firm/Company) |
| | |
| 2_WIL | DWOOD COURT (Address) |
| | (Address) |
| | AMPTON NY 11937 |
| (Ci | ty/State and Zip code) |
| | |
| For further information concerning this matter, please | and the second s |
| · | |
| LESLIE ANDREWS at | 631-329-3152 |
| | 631-329-3152 GRANGE Telephone Number) |
| , | |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |
| Enclosed is a check for the following amount: | |
| | |
| X \$70.00 Filing Fee | |

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. | (Name of corp words or abbre | JOURNEYS, INC. poration; must include the eviations of like import a or partnership if not so | ne word "INCO in language as | will clearly in | dicate that it is a co | | | |
|-----|--|---|------------------------------|---|---|-------------------------------|---------------|---------------------|
| 2. | NEW YORK | | 3 | 54-2076493 (FEI number, if applicable) | | | | |
| | (State or country under the law of which it is incorporated) | | | | | | rated) | |
| 4. | | 09/16/2002 | | 5 | | PERPETUAL corp. will cease to | <u> </u> | ···· |
| | • | (Date of incorporati | on) | | (Duration: Year o | corp. will cease to | exist or "per | petual") |
| 6. | • | | UPON (| QUALIFIC. | ATION | | | |
| | (Date first tra | nsacted business in Flor (SE) | | | insacted business in 1502 and 817.155, l | | pon qualifica | tion.") |
| 7. | <u></u> | 2 WI | | | r hampton n | Y 11937 | | |
| | | | (Pr | incipal office | address) | | • | \$ T = |
| | | 2 WI | LDWOOD CO | OURT EAS | r <u>HAMPTON N</u> | Y 11937 | | |
| | | | | rrent mailing | | | | |
| 8. | | | SPO | ORTS LES | SONS | | ******* | ð |
| ٠. | () | Purpose(s) of corporation | | | | ed out in state of F | lorida) 🔚 | 당 |
| 9. | Name and st | reet <u>address</u> of Florid | la registered (| agent: (P.O. | Box or Mail Drop | Box NOT accep | otable), E | AM FILE PU 20 |
| | Name: | LESLIE ANDRE | NS | | . | | - 프 - 프 | |
| Off | fice Address: | 37D COLONY L | ANE | | | ÇW. | | 8: 40 |
| | | FORT PIERCE | (City) | | , Florida | 34982 (Zîp 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 business addresses of officers and/or directors:

A. DIRECTORS

| Chairman | : LESLIE ANDREWS | , | | |
|------------------|--|---------------------------------------|--|--|
| Address: | 2 WILDWOOD COURT EAST HAMPTON NY 11937 | 1 | · · · · · · · · · · · · · · · · · · · | A G a Basque ; |
| Vice Chair | rman: ADRIENNE WAX | | | |
| | | | | ¥! ==== |
| Aggress: | 2 WILDWOOD COURT EAST HAMPTON NY 11937 | | | |
| Director: | | | . : | |
| Address: | | <u> </u> | | |
| . | | | · .* | र इन्ह ्र |
| Director: | | | | |
| Address: | | | <u> </u> | F |
| B. OFF | ICERS | | | į. |
| President: | LESLIE ANDREWS | | 778 - 13 | |
| Address: | 2 WILDWOOD COURT EAST HAMPTON NY 11937 | · · · · · · · · · · · · · · · · · · · | 33 3- | <u>}</u> |
| | | · · · · · · · · · · · · · · · · · · · | 20 AM | |
| Vice Presi | dent: ADRIENNE WAX | F. 182 3 | 5 0 | |
| Address: | 2 WILDWOOD COURT EAST HAMPTON NY 11937 | · | 8 D | |
| Secretary: | ADRIENNE WAX | | | |
| | 2 WILDWOOD COURT EAST HAMPTON NY 11937 | and the second | ·· · · · · · · · · · · · · · · · · · · | \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ |
| Treasurer: | LESLIE ANDREWS | · · · · · · · · · · · · · · · · · · · | | |
| Address: | 2 WILDWOOD COURT EAST HAMPTON NY 11937 | <u> </u> | eg to h | |
| NOTE: 13. | If necessary, you may attack an addendum to the application listing add | litional officers and/or | directors. | |
| 13 | (Signature of Chairman, Vice Chairman, or any officer listed in n | umber 12 of the applic | ation) | |
| 14 | LESLIE ANDREWS, PRESIDENT (Typed or printed name and capacity of person signi | ing application) | | = |

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of SPORTS JOURNEYS, INC. was filed on 09/16/2002, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 11th day of October two thousand and two.

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