## F60000004105

## TRANSMITTAL LETTER

To: Qualification/ Division of Co	8; ~	500 <u>0</u> g	/류크 <b>2</b> 6.	535-		
SUBJECT: US	POWER AND	6A5,	INC	海承:	/18/00-30 ****78.75	11U55U( 37字本本本本
·	(Name of	corporation	on - must include suffi	ix)		
Dear Sir or Madam:				•		
The enclosed "Applica "Certificate of Existence to transact business in I	ce", and check are sub-	ration for mitted to r	Authorization to Tran egister the above refe	sact Busines renced foreig	s in Florida" gn corporatio	, n
Please return all corresp	pondence concerning t	his matter	to the following:			
	TOM	CUMI	UINS			
		(Name of	Person)			
<u> </u>	US POWER	ANO	GAS, INC			
	(	(Firm/Con	npany)	-		
	537 DOUGL	AS A	VE, SUITE 1			
		(Addre	ess)			
	DUNE DIN	FL	34698		చౌం ⊆	>
		(City/Stat	e/Zip)			>
Should you need to call  TOM CUMMIN  (Name of Perso			please call:  733-8700  ode & Daytime Telep	EXT 216 hone Numbe		
STREET ADDRESS:			MAILING ADDRES	SS:	4	nth
Qualification/Tax Lien S Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399			Qualification/Tax Lie Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	ons		1/21
Enclosed is a check for the	ne following amount:					
	\$78.75 Filing Fee & Certificate of State		678.75 Filing Fee & Certified Copy	Certif	Filing Fee, icate of Statu ied Copy	ıs &

## 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.	US FOWER AND GAS, INC	
words or	f corporation; must include the word "INCORPORATED", "COMPANY", "COF abbreviations of like import in language as will clearly indicate that it is a corpor person or partnership if not so contained in the name at present.)	PORATION" or ation instead of a
_	EIN 59-3655	
2/	NEVADA 3. APPLICAT	<del>10                                    </del>
(State or c	Country under mic and of mineral and property	per, if applicable)
4	(Date of incorporation)  (Date of incorporation)  (Duration: Year corp. will cear	
T	(Date of incorporation) (Duration: Year corp. will cear	se to exist or "perpetual")
6.	ANTICIPATED START OF OPERATIONS 8/15/00	
(Da	ate first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 ar	nd 817.155, F.S.)
7	537 DOUGLAS AVE SUITE 1	
··	DUNEDIN FL 34698	
	(Current mailing address)	SE 90
8	ENERGY SERVICE PROVIDER IN DEREGULATE	O UTILITY MARKETS T
(Pt	urpose(s) of corporation authorized in home state or country to be carried out in s	tate of Florida)
9. Name a	and street address of Florida registered agent: (P.O. Box or Mail Drop	Box NOT acceptable)
	TA DA CILAN MALACE	: I in
Na		등록 않
Office Add	dress: 537 DOVGLAS AVE SUITE!	- NA - P
	OUNEDIN Florida 3469	8
	OUNEDIN , Florida, 3469 (Zip code	)
	, · ·	
10. Regist	stered 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.

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)			
Chairman:	TOM CUMMINS			
Address: _	537 DOUGLAS AVE SUITE! _			
_	DUNEOW FL 34698			
Vice Chain	man:			
_				
Director: _	-			
_				
Director:				
_				
B. OFFIC	ERS (Street address only - P.O. Box NOT acceptable)			
President: _	TOM CUMMINS			
Address:	537 DOVGLAS AVE SVITEI		(III	E SON
_	DUNEOW FL 34698	E en entre Transport	7	i. F 1 1
Vice Preside	ent:	verse (**)	= <b>:</b>  2	
			ಜ	
Secretary: _	TOM CUMMINS		<u>,</u>	<del></del>
Address:	537 DOUGLAS AVE SUITE T			
	DUNEDIN FL 34698			
Treasurer:	TOM CUMMINS			
Address:	537 DOUGLAS AVE SUITE!	<del></del> .		
	DUNEON FC 34698			
NOTE: TE		<del></del> ;		
13.	security, you may attach an addendum to the application listing additional officers and/or directors	š.		
· · ·	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)			
14	TOM CUMMING, PAESIDENT  (Typed or printed name and capacity of person signing application)			
	(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, **US POWER AND GAS** 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 JUNE 23, 2000, 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 Las Vegas, Nevada, on **JULY 6, 2000.** 

Dear Heller

Secretary of State

By Laurie M Burgess

Certification Clerk

