

# F08000003647

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000197400 3)))



H080001974003ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

RECEIVED AUG 19 2008

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 AUG 19 P 1:18

FILED

## FOREIGN PROFIT/NONPROFIT CORPORATION

### PHOENIX RESOURCES 1, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

8-20-08  
WCC

**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. PHOENIX RESOURCES, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

PHOENIX RESOURCES 1, INC.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 75-3117986  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/23/2003 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 74 MASTERS DR ST. AUGUSTINE, FL 32084  
(Principal office address)

74 MASTERS DR ST. AUGUSTINE, FL 32084  
(Current mailing address)

8. To engage in any activity or business permitted under the laws of the State of Florida.  
(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 NOT acceptable)

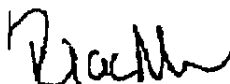
Name: RICK L MILLER

Office Address: 74 MASTERS DR

ST. AUGUSTINE, Florida 32084  
(City) (Zip code)

FILED  
2003 AUG 19 P 1:18  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

FILED  
2008 AUG 19 P 1:18  
CLERK OF DISTRICT COURT  
ST. AUGUSTINE, FL

**B. OFFICERS**

President: RICK L MILLER

Address: 74 MASTERS DR  
ST. AUGUSTINE, FL 32084

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_


Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. RICK L MILLER, PRESIDENT  
(Typed or printed name and capacity of person signing application)



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 AUG 19 P 1: 53

FILED

**RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN  
ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned RICK L MILLER, do hereby certify  
(Name)

that this Resolution of the Board of Directors of \_\_\_\_\_

PHOENIX RESOURCES, INC.  
(Name of Corporation)

a corporation duly organized and existing under the laws of DELAWARE,  
(State or Country)

was adopted on 7/30/2008, adopting the alternate

name of PHOENIX RESOURCES 1, INC.  
(Alternate Name) NOTE: Must contain a corporate suffix)

for use in Florida as its real name is unavailable in Florida.

Date: 7/30/2008

\_\_\_\_\_  
Signature of Chairman, Vice Chairman of the Board, a  
director or any officer

RICK L MILLER  
Title of person signing

\_\_\_\_\_

# Delaware

PAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHOENIX RESOURCES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF AUGUST, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PHOENIX RESOURCES, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF MAY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED  
2008 AUG 19 P 1:18  
SECRETARY OF STATE  
DELAWARE

3661714 8300  
080883916



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State  
AUTHENTICATION: 6500748

DATE: 08-19-08