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(Name of Person) (Firm/Company) 10555 West Flagler Miami FL 33/14
(City/State/Zip) Should you need to call someone concerning this matter, please call: Bee Huang at 365 1212 6670 (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O Box 6327 Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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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. Sunc Melecular Co. perutier (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPO abbreviations of like import in language as will clearly indicate that it is a corporation instead person or partnership if not so contained in the name at present.)	RATION" or words or of a natural
2. De laware (State or country under the law of which it is incorporated) 3. 65-6613 (FEI number)	if applicable)
4. September 19, 1995 (Date of Incorporation) 5. N/A (Duration: Year corp. will cear	
6. Open approval (Date Ifrst transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.1	55, F.S.)
7. 10555 West Flagler	
Miami, FL 33/74 . (Current mailing address)	
8. To engage in any lanful act or activity for which corporations (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) rough be eigen night under the Cheneral Corporation Law of Florida	
9 Name and street address of Florida registered agent: (P.O. Box or Mail acceptable)	
Name: Bee 1-lung	
Office Address: 2966 Wentwenth	
Ft. Landerdale , Florida , 333 . 10. Registered agent's acceptance:	3.2
Having been named as registered agent and to accept service of process for the corporation at the place designated in this application, I hereby accept the appregistered agent and agree to act in this capacity. I further agree to comply will all statutes relative to the proper and complete performance of my duties, and I and accept the obligations of my position as registered agent.	ointment as th the provisions of
(Registered agent's signature)	

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 addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: Hing Cheung Wong Address: 2966 Wentworth, Ft. Landerdale, FL 33332 Vice Chairman: Address: Director: Address: Director: Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Address: ______ Vice President: Address: ____ Secretary: Bee Huang Address: 2966 Wentworth Ft Landerckile FL 33332 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUNOL MOLECULAR CORPORATION" 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 TWENTIETH DAY OF SEFTEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNOL MOLECULAR CORPORATION" WAS INCORPORATED ON THE NINETEENTH DAY OF SEPTEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

Edward F. Freel, Secretary of State

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AUDIENTICATION

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DATE

09-20-95