APPLICATION FOR REINSTATEMENT FOR



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

LIMITED PARTNERSHIP

140000000039

1. Name of Limited Partnership

DOCUMENT #

GAS CONSULTING, LTD

FILED

98 MAY -7 PM 3: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

				DO NOT W	HITE IN THIS SPACE	
2, Mailing Address ADD E. HILHWAY 33 Suite, Apt #, etc		3. Frincipal Office Address 200 E. HIGHWAY 32 Suite Add W. etc.		4. Date Formed or Registered To Do Business in Florida	12/29/1993	
				5. FEI Number	Applied For	
City & State		City & State		65-04599	14 Not Applicable	
LEBANON .	Country	Zip Country		CERTIFICATE OF STATUS DE	CERTIFICATE OF STATUS DESIRED Sti 75 Additional Fee required for a Certificate of Status	
65536	USA	65536	USA	7. State or Country of Formatio	" FLORIDA	
8a. Capital Contrib	outions as Shown		of all Committed at a rate of \$7.	cos 61 000 on amount entered in 9b with a m		
ZERJ		\$437.50, for each year due this office.				
8h. Amount of Car	oital Contributions in			yg <u>ar due</u> this office, b eg inning with 1992 calei h <u>year report form is delinouent</u>	ndar year.	
FLORIDA to d		Note: If the amount en appropriate filing		iuni entered in 8a, a supplemental affidavit mi	ist be submitted along with a separate and	
	ERU			10 #		
	9, Name and Address of Current I	Registered Agent	Name	10, If changed, new registered agent/office		
			BUCHBI	VDER ELEGANT PI	9	
			Street Address	Street Address (P.O. Box Number is Not Acceptable) 46 SW 15 STREET		
			Suite, Apt. #, e	Suite, Apt. #, etc.		
			34 1 TE City			
			MIAM	<u> </u>	FL 33/30	
SIGNATURE (Register	enillar with and accept the obligations of Agent Accepting Appointment) X AL PARTNER THAT I	Jus!	U. Out	ار الأروح. DAT ARTNERSHIP OR OTHI		
<u>.</u>	MUST	BE REGISTER		WITH THIS OFFICE.	Description	
11. Names of	General Partner(s)		Office Box Numbers)	City, State and Zip Code	11a. Document Number	
EVERGREE	J ENERLY CORPORAT	100 E, HI	CHWAY 32 .	EBANON, MO 65530	L 36575	
				100002	5204313	
				-05/12	279801053029 887,50 ***1282,50	
				Kirk 12	82.50 ***1282.50	
		•	- C- 1	MOTRTEMEN!	T 97.98	
			REINSTATEMENT 97.9%			
					Cice	
			j			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statutes.

Typed or Printed Name of General Par V Signing Form LARRY WEIS

Telephone Number (4/7) 533-3007