

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV 14 PM 1:52

DOCUMENT #

1. Name of Limited Partnership

GAS CONSULTING, LTD

REINSTATEMENT 2000

2. Principal Office Address

200 EAST HWY 32

Suite, Apt. #, etc.

City & State

LEBANON, MO

Zip

65536

Country

USA

3. Mailing Office Address

200 EAST HWY 32

Suite, Apt. #, etc.

City & State

LEBANON, MO

Zip

65536

Country

USA

4. Date Formed or Registered

To Do Business in Florida

12-29-1993

5. FEI Number

65-0459914

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7a. Capital Contributions as shown on Record:

ZERO

7b. Amount of Capital Contributions in FLORIDA to date:

ZERO

FEES:

- 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for **each year due** this office.
 - 2.) Supplemental Fee(s): \$88.75 for **each year due** this office, beginning with 1992 calendar year.
 - 3.) Penalty Fee(s): \$500 penalty fee for **each year report form is delinquent**.
- Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8. Name and Address of Current Registered Agent

Name

BUCHBINDER & ELEGANT PA

Street Address (P.O. Box Number is Not Acceptable)

46 SW 1ST STREET

Suite, Apt. #, Etc.

SUITE 400

City

MIAMI

State

FL

Zip Code

33130

9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

10.	Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a.	Registration Document Number
	EVERGREEN ENERGY CORP.	200 EAST HWY 32	LEBANON, MO 65536		L36575
					600003479796--3 -11/29/00--01045--016 ****641.25 ****641.25

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

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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.

SIGNATURE

Larry Weis

DATE **11-7-2000**

LARRY WEIS

Telephone Number **417-533-3007**