## TRANSMITTAL LETTER

TO:	Registration Se Division of Co		
SUBJ	ECT:	ORE SORTERS (NORTH AMERICA), INC.	
		(Name of corporation - must include suffix)	
Dear S	Sir or Madam:		
"Certif		ation by Foreign Corporation for Authorization to Transact Business in Florice", and check are submitted to register the above referenced foreign corpora Florida.	
Please	return all corres	spondence concerning this matter to the following:	
	CATHERI	NE A. HEINRICH	
	ORE SOR	(Name of Person) 5000034-2 PTERS (NORTH AMERICA) INC11/01/00 ******78.	
		(Firm/Company)	<del>10 ******</del> 10*10
	8156-E	SO. WADSWORTH BLVD., #356	
	***************	(Address)	
	LITTLET	ON, CO 80128-5582	
		(City/State and Zip code)	📥
For fu	rther information	n concerning this matter, please call:	00 NOV
CAT	HERINE A HE	INRICH at ( 303 ) 720 98147631	1
STRE	(Name of Pers	FLORDE STATE	1-1 M12: 28
	tration Section	Registration Section	
409 E	on of Corporatio . Gaines St. lassee, FL 32399	P.O. Box 6327	4mh
		or the following amount:	11/6
□ \$70	0.00 Filing Fee	<ul> <li>S78.75 Filing Fee &amp; ☐ \$78.75 Filing Fee &amp; ☐ \$87.50 Filing</li> <li>Certificate of Status</li> <li>Certified Copy</li> <li>Certified Copy</li> <li>Certified Copy</li> </ul>	f Status &

## 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.		ORE SORTERS (NORT						_
	words or abbrevia	tion; must include the word "INCOI tions of like import in language as v partnership if not so contained in the	vill clearly	y indicate that it is				
2.	DEL	AWARE	3.	58-14636	595			
	(State or country under the law of which it is incorporated)			(FEI number, if applicable)				-
4.	DEC	16, 1981	5.	PERPETU	L			
••	(Date	of incorporation)			er corp. will ceas	se to exist or "perp	etual")	-
6.	UPO	N OUALIFICATION						_
(	(Date first transact	ted business in Florida. If corporation (SEE SECTIONS				sert "upon qualifí	ation."	)
7.	277	O INDIAN RIVER BLVD, SU	PPE 31	8, VERO BEA	CH, FL 3	2961		
(Principal office address)								
	815	6=E SO. WADSWORTH BLVD.	#356.	LITTLETON	. co 80128	35582		
		(Current ma						•
8.		TAL OF RETURNABLE BINS				~ ()	0	_
	(Purpose(s)	of corporation authorized in home	state or co	ountry to be carrie	d out in state of	Florida)	<u> </u>	
9.	Name and stre	et address of Florida registered	d agent:	(P.O. Box or M	Iail Drop Box I	NOT acceptable		П
		C T CORPORATION SYS				SS AS	1	
	Name: _	C I CONTONALION DID		-		<u> </u>		ED
Of	fice Address: _	1200 S. PINE ISLAND	RD	<del>.</del>		FL®	A¥ 12:	
		PLANTATION		, Florida	33324		?: 28	
	_	(City)			(Zip code)	سعند	ω	
10	. D							
		gent's acceptance: ed as registered agent and to ac	cept serv	rice of process f	or the above st	ated corporation	n at the	e plac
			4	34 3		<b>-</b>		

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.

Hiedi Liesch.

(Registered agent's signature) Spec. ASST - Sect.

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.

7	nd business addresses of officers and/or directors:				
A. BIRECTO	ORS · / · · · · · · · · · · · · · · · · ·				
Chairman:	RUDOLF MAX VEY	·		· · · · · ·	<del>-</del> .
Address:	BARTLETT ROAD, BOX 565, BOKSBURG, SOUTH AFRICA		·		<del>_</del>
Vice Chairman:			स्त्र चार्च इ.		
Address:					
Director:	DEMETRI SPIROU		<u></u>	<del></del>	<u>.</u>
	382 JAN SMUTS AVENUE, CRAIGHILL 2024 SOUTH AFRICA		<del></del>		<del>.</del>
				1	
				· · · · · · · · · · · · · · · · · · ·	<del> </del>
B. OFFICE		-	-		
<del></del>	RUDOLF MAX VEY	<u>- ₽</u> &	-8-		<del>_</del>
Address:	BARTLETT ROAD, BOX 565, BOKSBURG, SOUTH AFRICA	LAHAS:	- 40N	丁二	<u> </u>
AUTHORIZED XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	CATHERINE A. HEINRICH	Y OF S.	<u>-</u>	m U	
Address:	8156-E SO. WADSWORTH BLVD. 356, LITTLETON, CO	80128=3: DA	28 28		<del>_</del>
Secretary:	DEMETRI SPIROU		<del>-,</del>		
Address:	382 JAN SMUTS AVENUE, CRAIGHILL 2024, SOUTH AFRICA				<del></del>
Treasurer:					<del></del>
Address:		<del></del>			<del></del>
NOTE: If no	cessary you may attach an addendum to the application listing additional office				·
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	or the applic	cation)		

RINE A. HEINRICH AUTHORIZED AGENT

(Typed or printed name and capacity of person signing application)

CATHERINE A. HEINRICH

## State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORE SORTERS (NORTH AMERICA), 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 FOURTEENTH DAY OF SEPTEMBER, A.D. 2000.

00 NOV -1 NN 12: 28
SECRETARY OF STATE
TALL AHASSEF ELOPIDA

Edward J. Freel, Secretary of State

AUTHENTICATION: 0674417

DATE: 09-14-00

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