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CORPORATION(S) NAME		"	
Suburban Franchising, Inc.			·
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() Nonprofit			\$4 me are correspondent approximation
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() Limited Partnership () LLC	() Annual Report	() Other $\begin{tabular}{c} \begin{tabular}{c} \be$	<i>√ </i>
() LLC	() Name Registration () Fictitious Name	() Change of RA	Ö
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(x) Walk In	() Will Wait	(x) Pick Up 26	C myggg
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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. Suburban Fran	nchising, Inc.	-			
words or abbre	oration; must include the word "INCORPOR eviations of like import in language as will cle or partnership if not so contained in the name	early indicate			TALLA
2. Nevada		3. 22-3774	147		_ S _ E
	try under the law of which it is incorporated)		`	if applicable)	NP
4. 01/09/2001		5. Perpetua			——————————————————————————————————————
(Da	te of incorporation)	(Durati	ion: Year corp. will c	ease to exist or "po	erpetua(B)
6. Upon Qual					erpetua(B)
`	sacted business in Florida. If corporation has (SEE SECTIONS 607.1			insert "upon qual	ification.")
7. 240 Route 10	West, Whippany, NJ 07981-0206	- d dwoga)			
	(Principal office	address)			
same	(Current mailing	address)			
	(Current manning	audicss)			
See Attachmen	nt	÷			
	e(s) of corporation authorized in home state o	r country to l	ne carried out in state	of Florida)	
9. Name and st	reet address of Florida registered age	at: (P.O. B	ox or Mail Drop Bo	x <u>NOT</u> acceptab	ole)
Name:	C T Corporation System			-me	
Office Address:	1200 South Pine Island Road	<u></u>	ı		
	Plantation	F	lorida 33324		
	(City)	, , 1	lorida 33324 (Zip code)		+ a1
	,				
	agent's acceptance:				
	med as registered agent and to accept so is application, I hereby accept the appo				
uesignuieu in in further agree to	comply with the provisions of all statut	es relative t	to the proper and co	mplete perform	ance of my
	familiar with and accept the obligation				
	C T Corporation System 1				
By:	Allem				
-	(Pagistared schut	'e cianatura)			,

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. DIR	ECTORS SEE ATTACHMENT		
Chairma	n:	· · · · · · · · · · · · · · · · · · ·	
Address:	<u> </u>		
		<u> </u>	
Vice Cha	airman:		
	·		
			TAL
Director:	Mark A. Alexander		至
Address:	240 Route 10 West	2	SANT.
	Whippany, NJ 07981-0206	₽ +	ingti Ta
Director:	Michael J. Dunn, Jr.	တ	SEZ.
Address:	240 Route 10 West.		المستقر
	Whippany, NJ 07981-0206		
Pres	sident: Mark A. Alexander		
Address:	240 Route 10 West		
	Whippany, NJ 07981-0206		
Secretary	Janice G. Meola		
Address:	240 Route 10 West Whippany, NJ 07981-0206		
Treasurer	Robert M. Plante		· · · · · · · · · · · · · · · · · · ·
Address:	240 Route 10 West Whippany, NJ 07981-0206		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers		
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the		
1.4	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	e application)	
14	Tanice G. Meola Secretary (Typed or printed name and capacity of person signing application)	(100-101-101-101-101-101-101-101-101-101	

Attachment to Florida
Application By Foreign Corporation for Authorization to Transact Business In Florida

Purpose Clause

Franchising, namely, offering technical assistance in the establishment and/or operation of retail and wholesale distributorships and retail stores featuring propane gas as well as propane and natural gas powered appliances and equipment and the repair and maintenance of same.

Officers & Directors

-		<u> </u>		.17
1.	Full Name:	_	Mark A. Alexander	
	Officer/Director:		Officer, Director	
	Officer's Title:		President and Chief Ex	xecutive Office
	Director's Title:		Other Director	,
	Business Address:	-	240 Route 10 West	:
	City:	-	Whippany	
	State:		NJ	
	ZIP Code:		07981-0206	5
2.	Full Name:		Michael J. Dunn, Jr.	
	Officer/Director:	<u>=</u>	Officer, Director	77
	Officer's Title:	-	Senior Vice President	
	Director's Title:		Other Director	
	Business Address:	_	240 Route 10 West	
	City:			
	State:		Whippany NJ	
	ZIP Code:			
	Zir Code.		07981-0206	
3.	Full Name:		Robert M. Plante	
	Officer/Director:	*	Officer	
	Officer's Title:		Vice President and Tre	asurer
	Business Address:	_	240 Route 10 West	abar or
	City:		Whippany	
	State:		NJ	
	ZIP Code:		07981-0206	'
	ZH Codo.		07901-0200	
4.	Full Name:		Janice G. Meola	_
	Officer/Director:		Officer	
	Officer's Title:		Secretary	
	Business Address:	-	240 Route 10 West	
	City:	_	Whippany	_
	State:		-NJ	
	ZIP Code:	-	07981-0206	
5.	Full Name:		David R. Eastin	
	Officer/Director:	-	Director	
	Director's Title:		Other Director	
	Business Address:		240 Route 10 West	
	City:	-	Whippany	
	State:		NJ	
	ZIP Code:		07981-0206	
	ZII COUC.		0/301-0700	



I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SUBURBAN FRANCHISING, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 9, 2001, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on April 4, 2002.

DEAN HELLER
Secretary of State

By acqueline

Certification Clerk