

Division of Corpor			
SUBJECT: Heartlan	d Environmental Solutions, Inc.	_	
	(Name of corporation - must include suffix)	,	
Dear Sir or Madam:	24 FOR LOPP CUS		
	by Foreign Corporation for Authorization to Transact Business in Florida", and check are submitted to register the above referenced foreign corporation da.		
Please return all correspond	lence concerning this matter to the following:		
Wendy Thomas			*
	(Name of Person)	HAE ABOOL	7
Heartland Environme	ental Solutions, Inc.		
	(Firm/Company)	1	
4406 New Haven Av	e.		
	(Address)		
Fort Wayne, IN 4680	3 6000073463 1 -08/26/02010	36 <u>-</u> -000	-7
	(City/State and Zip code) ******78.75 *	50003 k***78.	75
	cerning this matter, please call:		
Wendy Thomas	at (260) 425-9750		
(Name of Person)	at (260) 425-9750 AUG (Area Code & Daytime Telephone Number) 25 AM (Area Code & Daytime Telephone Number) 35 AM (Area Code & Daytime Telephone Number) 37 AUG		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314)	
Enclosed is a check for the	following amount:		
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status Certified Copy	&	-

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. Heartland	d Environmental Solutions, Inc.				
words or abbre	oration; must include the word "INCORPOR eviations of like import in language as will cloor partnership if not so contained in the name	early	indicate that it is a corporation instead of	or a	-
2. Indiana		3.	N/A		
(State or country under the law of which it is incorporated)			(FEI number, if applicable)	
4. 12/05/00		5.	Perpetual		
(Date of incorporation)		٠.	(Duration: Year corp. will cease to exist	or "perpetual")	-
6. upon qualification					
		501,	transacted business in Florida, insert "upor 607.1502 and 817.155, F.S.)	qualification.")	
74406 Ne	w Haven Ave. Fort Wayne, IN 468	303			
	(Principal office		ess)		
4406 Ne	w Haven Ave. Fort Wayne, IN 468	303			
	(Current mailing	addr	ess)		
გ	ental Contractors (s) of corporation authorized in home state or	r coı	untry to be carried out in state of Florida)	<u> </u>	
9. Name and st	reet address of Florida registered ager	at: (P.O. Box or Mail Drop Box NOT acc	eptable) S	
Name:	CT Corneration System			AUG	
Office Address:	1200 South Pine Island Rd.		 ,	26 / RASY ASSET	
	Plantation		, Florida		2 * 1
	(City)		(Zip code)	30. VIS 0':6	
Having been nar designated in thi further agree to	agent's acceptance: med as registered agent and to accept se is application, I hereby accept the appoi comply with the provisions of all statute familiar with and accept the obligation	ntm es re	ent as registered agent and agree to a lative to the proper and complete per	ict in this capaci	tv. I
-	(Registered agent'	s sio	Jeffrey R. Graves Assistant Secretary		•

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.

$^{\circ}$ 12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: N/A	
Address: N/A	_
N/A	_
Vice Chairman: N/A	_
Address: N/A	_
N/A	
Director: N/A	_
Address: N/A	_
N/A	
Director: N/A	_
Address: N/A	_
N/A	
B. OFFICERS	_
President: Craig S. Hartman	
Address: 4406 New Haven Ave.	<u></u>
Fort Wayne, IN 46803	
Vice President: Gina Ely	_
Address: 4406 New Haven Ave.	_
Fort Wayne, iN 46803	<u></u>
Secretary: Criag S. Hartman	_
Address: 4406 New Haven Ave. Fort Wayne, IN 46803	_
Treasurer: None	_
Address: N/A	_ = = :
	-
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	_
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
Craig S. Hartman, President/Owner	_
(Typed or printed name and capacity of person signing application)	

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper office to execute this certificate.

I further certify that records of this office disclose that

HEARTLAND ENVIRONMENTAL SOLUTIONS, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 5, 2000, and was in existence or authorized to transact business in the State of Indiana on August 13, 2002.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Thirteenth day of August, 2002.

SUE ANNE GILROY, Secretary of State

- Sue anne Litray

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