## T020000005175

TO: Registration Section Division of Corporations	
SUBJECT: ChemTechnologies of MS, INC.	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Martin C. Stephens / Angi Spencer (Name of Person)	
ChemTechnologies of MS, INC. 00008284510-0 (Firm/Company) -10/08/02-01048-001	
208 S. Whitworth Street	
(Address) PA	
Brookhaven, MS 39601	- 3
(City/State and Zip code)	
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For further information concerning this matter, please call:	₹ <b>*</b>
(Name of Person) at (601) 833-0403 (Area Code & Daytime Telephone Number)	
(Alea Code & Daytine Telephone (Amber)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  MAILING ADDRESS: Registration Section Division of Corporations Pivision of Corporations P.O. Box 6327 Tallahassee, FL 32314	·
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\sigma\$ \$78.75 Filing Fee & \$\sigma\$ \$78.75 Filing Fee & \$\sigma\$ \$87.50 Filing Fee, Certificate of Status Certified Copy 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. ChemTechnologies of MISSISSIPPITE  (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. MISSISSIPPI 3. 72-1366 258 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. O4-04-1997  (Date of incorporation)  5. Perpetual  (Duration: Year corp. will cease to exist or "perpetual")
6
7. 208 South Whitworth Street, Brookhaven, M5 39601 (Principal office address)
P.O. Box 1004, Brookhaven, US 39602 (Current mailing address)
8. <u>Water French Sales &amp; Service</u> (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Kevin Anaston
Office Address: 3338 Country Meadow Lane  Pace , Florida 3257/ (Zip code)
72ce , Florida 3257/ (City) (Zip code)
10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation at the place 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.
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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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS '	
Chairman:	<del></del>
Address:	
Vice Chairman:	
Address:	
Director:	<del></del>
Address:	
	· · · · · · · · · · · · · · · · · · ·
Director:	
Address:	
B. OFFICERS	
President: Martin C. Stephens	
Address: 64 Hog Chain Deive	
Bogue Chitto, Ms 39629	
Vice President: <u>Carolyn</u> C- Stephens	
Address: 64 Hog Chain Deive	2 OC
Bo Gue CHitto, MS 39629	FI ASS
Secretary: <u>Carolyn C. Stephens</u>	HO A DEC
Address:Same	25
Treasurer: MACTIN C. Stephens	Sm E
·	
Address: Same	
NOTE: If necessary, you may attach an addendum to the application listing additional officers at	nd/or directors.
12 martin C. Neskans President	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	e application)
14. Angie C. Spencer, Office Manager (Typed or printed name and capacity of person signing application)	

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## State of Mississippi

## Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi; to be filed in my office, do hereby certify:

That on April 04,1997 the state of Mississippi issued a Charter/Certificate of Authority to:

CHEM TECHNOLOGIES OF MISSISSIPPI, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is Perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

Given under my hand and seal of office October 02,2002

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ERIC CLARK, Secretary of State