F05000004571

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





800056557688

08/05/05--01038--001 **70.00

M. HODGES

TRANSMITTAL LETTER

TO:

TO: Registration S Division of Co			
SUBJECT:	ly Muse	s Water I	restment
	(Name of corp	oration - must include suffix)	,
Dear Sir or Madam:			
	ce," and check are submitte	n for Authorization to Transard to register the above refere	
Please return all corres	pondence concerning this r	natter to the following:	
Marylou F. Hall			
	(Na	me of Person)	
Holy Moses Water Tre	atment, INc.		
	(Fir	m/Company)	
1659 NW County Road	d 25A		
		(Address)	
Lake City, Florida 320!	55		
	(City/s	State and Zip code)	
For further information	a concerning this matter, ple	ease call:	
Marylou F. Hall	at (380		
(Name of Pers	son) (A	Area Code & Daytime Teleph	ione Number)
STREET ADI Registration So Division of Co 409 E. Gaines Tallahassee, Fl	ection rporations St.	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
Enclosed is a check for	the following amount:		
23 \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, 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.

	ater Treatment, Inc.		
(Enter name of co "Inc.," "Co.," "Co	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busine	ess in Florida)
2. Georiga, USA		43-2086559	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 1 August 2005	5	Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual")
6. NA			
	•	in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liability)	
7. 1659 NW CR 25	Lake City, Florida 32055		
,	(Principal office ad	iress)	
same			
	(Current mailing ad	dress)	
			S
8. WAter Purificiat		051, 11,	
(Purpose(s) of corporation authorized in home state or o	ountry to be carried out in state of Florida)	
9. Name and stree	t address of Florida registered agent: (P.	O. Box NOT acceptable)	آن. آن
Name:	Maryou F. Hall		
Office Address:	1659 NW CR 25A		
	Lake City,	, Florida 32055	<u>,</u>
	(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.

(Registered agent's signature) Sac of State

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.

^a12. Names and business addresses of officers and/or directors:

Chairman:	The state of the s
Address:	A CONTRACTOR OF THE STATE OF TH
	The state of the s
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	The state of the s
<u> </u>	
B. OFFICERS	
<u>.</u>	responses to the first than the firs
1650 N/M CD 25A	
	And the second s
address: 1659 NW CR 25A Lake	
reasurer.	
ddress:	المنافرة والمنافرة

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0547726
DATE INC/AUTH/FILED: 07/11/2005
JURISDICTION : GEORGIA
PRINT DATE : 08/03/2005
FORM NUMBER : 211

HOLY MOSES WATER TREATMENT, INC. MARYLOU F. HALL 1704 AL BROOKS DRIVE VALDOSTA, GA- 31601

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

LY MOSES WATER TREATMENT INC A GEORGIA PROBIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate telates only to the legal existence of the above-named entity as of the print date above | It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20050803184411492



Cathy Cox Secretary of State