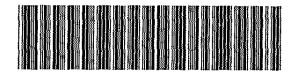
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only

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## COVER LETTER

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	06 AUG 14 PM 3: 44
TO: New Filing Section Division of Corporations	SECRETARY UP STATE TALLAHASSEE, PLORIDA
SUBJECT: Natural Homent, INC	•
(Name of corporation - must include	e surrix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to "Certificate of Existence," and check are submitted to register the above transact business in Florida.	
Please return all correspondence concerning this matter to the following	2:
Mimberly M. Digman	
Kimberly A. Sigman (Name of Person)	
Natural Element, TAC.  (Firm/Company)	
(Firm/Company)	
P.O. Box 14207 (Address)	
(Address)	
Mox100 Bench, FL 32410 (City/State and Zip code)	
(City/State and Zip code)	
For further information concerning this matter, please call:	
1/2 /2 / 14/0	0// 5
him Sigman at (90%) 440. (Name of Person) (Area Code & Daytime	-0660
(Name of Person) (Area Code & Daytime	e Telephone Number)
STREET/COURIER ADDRESS: MAII	LING ADDRESS:
	Filing Section
•	on of Corporations
	3ox 6327
2661 Executive Center Circle Tallah Tallahassee, FL 32301	nassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing For Certificate of Status Certified Copy	
	mano oaki



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06 AUG 14 PM 3: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 3, 2006

KIMBERLY A. SIGMAN POST OFFICE BOX 14207 MEXICO BEACH, FL 32410

SUBJECT: NATURAL ELEMENT, INCORPORATED

Ref. Number: W06000034328

We have received your document for NATURAL ELEMENT, INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden Document Specialist New Filing Section

Letter Number: 506A00048715

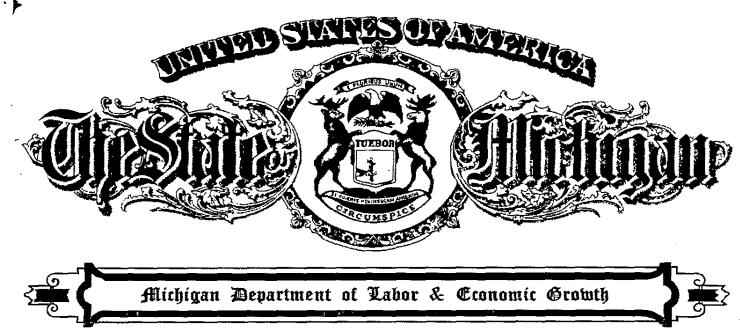
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLÖRIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	c.," "Co.," "Co.				utea	or De	cora+	ins t	Desi	ig.M	INC
(If	name unavail	able in Florie	la, enter alter	nate corpora	te name a	dopted for the	ne purpose (	of transacti	ng busine	ss in Fl	lorida)
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	(Date	or meorpora	nonj			(Daration,	rear corp.	viii ocase i	O CAISE OF	perpe	)
6			(Date first (	transacted bu	siness in	Florida, if n	rior to regis	tration)			<del></del>
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	121	1130 9	1	(Principal of	fice addre	ss)	<del></del>				
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9. Na	me and stree	t address of	Florida reg	istered ager	it: (P.O.	Box NOT	_acceptable	<b>2</b> )	<b>美</b> 質	S ·	
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		mas	UCD (	Boach		, Florid	ia <u>324.</u>	50		Ę,	
			(C)	ity)			(Zip c	ode)		Cr.	
	legistered ag										
	a haan nam	ed as regisi	ered agent i	and to acce	nt service	e of proces.	s for the a	bove state	d corpore	ation (	at the plac

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. DIRECTORS	•
Chairman: <u>Bim</u> Zigman	
Address: P.O. Box 14207"	<u> </u>
MOXICO Boach, FL 32410	
Vice Chairman: Kim Diambi	
Address: P.O. Box 14207	7
Mexico Beach, FL 3240	<u></u>
Director:	
Address:	
	<u></u>
Director:	TAXT AAT
Address:	CRE
	ASS ASS
B. OFFICERS	HO P D
President: him Sigman	
Address: P.O. Box 14207	<b>&gt;</b> (5)
movico Beach, FL 32410	
Vice President: Arthur Sigman	
Address: P.O. Box 14201	
Max 100 BEACH, FL 32410	· ·
Secretary: <u>him Dismail</u>	*
Address: (.3#me)	
Treasurer: Hrt Digm+W	government of the second
Address: SAMO	
Thomas Carriery	
	ficers and/or directors.
NOTE: If necessary, you may attach an addendum to the application listing additional of	ficers and/or directors.
NOTE: If necessary, you may attach an addendum to the application listing additional of	tion)



Lansing, Michigan

This is to Certify That

## NATURAL ELEMENT, INC.

was validly incorporated on November 7, 2002, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States. =

TARY OF STATE

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 18th day of July, 2006.

, Director

Bureau of Commercial Services