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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Mountain Breez (Name of c	e Heating Cooling and Electrical, Incorporation - must include suffix)
Dear Sir or Madam:	
	ation for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to
Please return all correspondence concerning th	is matter to the following:
/ gapard D. 1	110775
Leonard D. L	Name of Person)
Charles III walls (III	- Conditining Inc =
Hames City, 7	-n+
	(Address)
Hamis City 7	loriales 33 270
(Ci	ty/State and Zip code)
For further information concerning this matter	, please call:
Leonard Watts at (863 422 - 2295 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32301	Tananassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee Certificate of Sta	

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.	Mountain Breeze Heating, Cooling and Electrical, Inc		
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"		
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")		
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
2	North Carolina 3. 56-2205/84		
	North Carolina (State or country under the law of which it is incorporated) 3. 56-2205/84 (FEI number, if applicable)		
,,	(Date of incorporation) 5. Peroctual (Duration: Year corp. will cease to exist or "perpetual")		
6.			
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7.	P.O. Box 923 System (ity, 31 33848) (Current mailing address)		
	(Principal office address)		
	P.O. Box 923 Intercession (ity, Fl 338 48		
	(Current mailing address)		
		200	-
8.	dir-Conditioning Sales	ZOOS NOV	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	2	T
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	27	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Semand D. Watto Fiffice Address: Fo 3 Nilsew Street	-5	
		ယ္	
0	ffice Address: 803 Nilsew Street	Ś	
	Hice Address: Jane City, Florida 33844 (City) (Zip code)	7	
	(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)

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: Leonard D Watts
Address: 150 Mirjam Court
Winter Haven, Fl 33884
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
- Address:
B. OFFICERS
President: Long D. Watto
Address: 150 Miriam Caurt P3 3
Winter Haven De 33884
Vice President: Jonnie H. Watts
Address: 150 Milian Court SE w
Winter Haven, Fl. 33884
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. The b auto
(Signature of Director or Officer listed in number 12 of the application)
14. Leonard D. Watts (Typed or printed name and capacity of person signing application)



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

MOUNTAIN BREEZE HEATING, COOLING AND ELECTRICAL, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 20th day of July, 2000, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

SECRETARY OF STATE

DEPARTMENT OF THE PARTMENT OF

Certification# 86105538-1 Reference# 8396202- Page: 1 of 1 Verify this certificate online at www.secretary.state.nc,us/verification IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of November, 2006.

Elaine A. Marshall

Secretary of State