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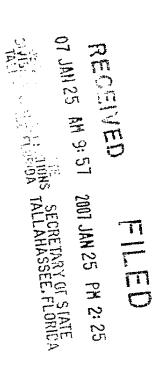
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1.	Dripane Systems	Consulting, Inc.			
	(CORPORATE NAME AND DOCUMENT #)	(A) (A) (A)			
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6.	AND DOOR HEAVEN IN				
	(CORPORATE NAME AND DOCUMENT #)				
SPECIA	L INSTRUCTIONS:				
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# 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.

PROPANE	SYSTEMS CONSULTING, INC.		v. v. 14
	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"	
		<u>a a series de la companya del companya del companya de la company</u>	
(If name unavaila	able in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting business in Florid	la)
2. VERMONT	3	20-4477520	: 4:=- ' ··
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
4. FEBRUAR	Y 21, 2006	PERPETUAL	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual"	")
6. UPON FI	LING OF THIS APPLICATION		
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
7 1963 SH	ELDON WOODS ROAD, FAIRFIELD,	VERMONT 05455	१४ - १ <i>म होद</i> े
	(Principal office ad	ldress)	
1963_SH	ELDON WOODS ROAD, FAIRFIELD,	VERMONT 05455	· <u>*</u>
<del>,                                    </del>	(Current mailing ac		
8. TO PROV	IDE CONSULTING SERVICES TO P		24
(Purpose(s	) of corporation authorized in home state or	country to be carried out in state of Florida)	5
9. Name and stree	t address of Florida registered agent: (P	O. Box NOT acceptable)	TILE BIJH 25
Name:	JAMES J. HOCTOR	SSET	\$ \$ \$
Office Address:	450 SOUTH ORANGE AVENUE	<u> </u>	是口
	ORLANDO (City)	, Florida 32801 (Zip code)	2: 25

#### 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.

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.

SECRETARY OF PH 2:25 12. Names and business addresses of officers and/or directors. A. DIRECTORS DOUGLAS H. GRANT Director: 1963 Sheldon Woods Road Address: _____ Fairfield, Vermont 05455 XXXXXXXXXX Director: KIM BRILL Address: ______ 1413 Sandy Birch Road Georgia, Vermont 05468 PHILIP LAPIERRE Director: Address: 1413 Sandy Birch Road Georgia, Vermont 05468 Address: ____ B. OFFICERS KIM BRILL President: 1413 Sandy Birch Road Address: Georgia, Vermont 05468 DOUGLAS H. GRANT Vice President: 1963 Sheldon Woods Road Address: ____ Fairfield, Vermont 05455 MARY GRANT Secretary: _____ 1963 Sheldon Woods Road, Fairfield, Vermont 05455 Address: PHILIP LAPIERRE Treasurer: Address: 1413 Sandy Birch Road, Georgia, Vermont 05468 NOTE: If pegessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) PHILIP LAPIERRE, Director

(Typed or printed name and capacity of person signing application)

## STATE OF VERMONT OFFICE OF SECRETARY OF STATE

### Certificate of Good Standing

I, Deborah L. Markowitz, Vermont Secretary of State, do hereby certify that according to the records of this office

PROPANE SYSTEMS CONSULTING, INC.

a corporation formed under the laws of the State of Vermont

was filed for record in this office on February 21, 2006

I further certify that the corporation has perpetual duration, that its most recent annual report is on file, and, as of this date, articles of dissolution/withdrawal have not been filed.

January 22, 2007

Given under my hand and the seal of the State of Vermont, at Montpelier, the State Capital

Deborah Markowitz Secretary of State

