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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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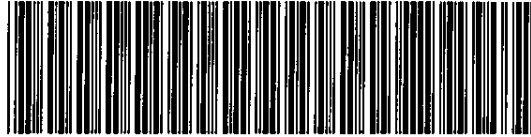
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 FEB 16 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. McKnight FEB 19 2007

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: NEXGEN BIOFUELS, 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:

Jim McALINDEN
(Name of Person)

NEXGEN BIOFUELS, INC
(Firm/Company)

2533 WINDGUARD CIRCLE, SUITE 102
(Address)

WESLEY CHAPEL, FL 33543
(City/State and Zip code)

For further information concerning this matter, please call:

Jim McALINDEN at (813) 767-1411
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$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.

1. NEXGEN BIOFUELS, 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. DELAWARE

(State or country under the law of which it is incorporated)

3.

20-544474

(FEL number, if applicable)

4.

8/18/06

(Date of incorporation)

5.

PERPETUAL

(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.

2533 WINGUARD CIRCLE, SUITE 102, WESLEY CHAPEL, FL 33543

(Principal office address)

SAME

(Current mailing address)

8.

ADMINISTRATION OF BIOFUEL PLANT OPERATIONS

(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 NOT acceptable)

Name:

JIM McALINDEN

Office Address:

2533 WINGUARD CIRCLE, SUITE 102

WESLEY CHAPEL

(City)

, Florida 33543

(Zip code)

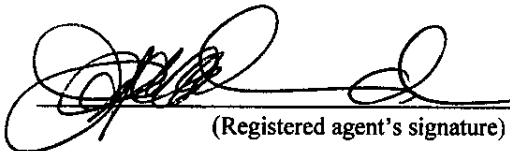
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: MS. ARUNA AJJARAPU

Address: 9120 ROCKROSE DR.
TAMPA, FL 33647

Vice Chairman: _____

Address: _____

Director: JIM MCALINDEN

Address: 17112 CARRINGTON PARK DR. #904
TAMPA, FL 33647

Director: _____

Address: _____

B. OFFICERS

President: RAM AJJARAPU

Address: 9120 ROCKROSE DR.
TAMPA, FL 33647

Vice President: _____

Address: _____

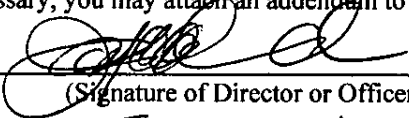
Secretary: JIM MCALINDEN

Address: 17112 CARRINGTON PARK DR., #904 TAMPA, FL 33647

Treasurer: ARUNA AJJARAPU

Address: 9120 ROCKROSE DR., TAMPA, FL 33647.

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. JIM MCALINDEN / SECRETARY
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

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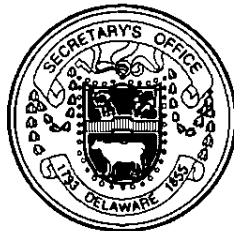
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEXGEN BIOFUELS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF FEBRUARY, A.D. 2007.

APPROVED
AND
FILED
07 FEB 16 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4203556 8300

070131526



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5413364

DATE: 02-07-07