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 Account Number
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 Phone
 : (305)634-369

 Fax Number
 : (305)633-969

.

: EMPIRE CORPORATE KIT COMPANY : 072450003255 : (305)634-3694 : (305)633-9696

FOREIGN PROFIT/NONPROFIT CORPORATION

ENVIRO FUELS MANUFACTURING, INC.

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APPLICATION BY FOREIGN CORFORATION 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.

ENVIRO FLELS MANUFACTURING, 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 NEVADA 3. 26-122301029 -
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/09/07 S. PERPETUAL TO ST
(Date of incorporation) (Duration: Year corp. will coase to exist or "perpensit")
6N/A
(Date of incorporation) 6. (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)
7
(Principal office address) JOEL MARCUS, C.P.A.
676 WEST PROSPECT ROAD
(Current realling address) FT. LAUDERDALE, FL 33309
6. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florids)
9. Name and streat address of Florida registered agent: (P.O. Box NOT acceptable)
Office Address: 676 W. PROSPECT LD
FT. LAUDERDALE, Florida 33309
(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 matutes relative to the proper and complete performance of my duties,
and I am familiar with and accept the obligations of my position as resistered areas.

(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.

2. Names and business addresses of officers and/or directors:	-11_ED 07 DEC -3 PM 1:12
A. DIRECTORS	SECRETARY OF STATE TALLAHASSEE, ELORIDA
Chebrosan:	MELCHASSEE, FLORIDA
Address:	
Vice Chainman:	
Addross:	
Address:	,
Director:	
Address:	
Provident: JOEL NIARONS Address: 676 WEST PROS FT- LAY DERDALE,	PECT ROAD FL 23309
Vice President:	<u></u>
Address:	
Secretary:	
Addrass:	
	•
Address:	
NOTE: If nocessary, you may attach an addition to the application	listing additional officers and/or directors.
13	
(Signature of Director or Officer listed in namb	
14 (Typed or printed name and capacity of perso	1 den

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