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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: FREY TECHNOLOGIES, I	NC.
	on - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.	Authorization to Transact Business in Florida," register the above referenced foreign corporation to
Please return all correspondence concerning this matte	r to the following:
GREG FREY	
(Name o	f Person)
FREY TECHNOLOGIES, INC.	
(Firm/Co	ompany)
26721 DUBLIN WOODS CIR., STE#	‡1
(Add	ress)
BONITA SPRINGS, FL 34135	
(City/State	and Zip code)
For further information concerning this matter, please GREG FREY at (239)	call:) 947-2778
	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 & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

MOTE: CERTICATE OF EXISTENCE FROM NYS is

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.

corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")			
able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting busin	ness in Florida)	
RK STATE	3. N/A		
under the law of which it is incorporated)	(FEI number, if applicable)		
	5. PERPETUAL		
	(Duration: Year corp. will cease to exist or "perpetual")		
Y 15, 2008			
(Date first transacted business			
·	•	1125	
· · · · · · · · · · · · · · · · · · ·		+135	
(Principal office a	ddress)		
(Comment on Nicon	. ddmaa)		
(Current maining a	udress)		
ND DISTRIBUTION OF PO	OL SUPPLIES		
		<u> </u>	
et address of Florida registered agent: /F	O Roy NOT accentable)	JAN 23 CIKETARY AHASSE	
	.O. Box <u>ivor</u> acceptable)	ASS	
MICHAEL A. MANLET		111	
Office Address: 26721 DUBLIN WOODS CIR., #1		F ST FLO	
BONITA SPRINGS	Florida 34135	AM II: 47 OF STATE E. FLORID	
(City)	(Zip code)	7	
	Corp," "Inc," "Co," or "Corp.") RK STATE under the law of which it is incorporated) (Date first transacted busines (SEE SECTIONS 607.1501 & 607) (BLIN WOODS CIR., STE # (Principal office a (Current mailing a ND DISTRIBUTION OF PO (S) of corporation authorized in home state or et address of Florida registered agent: (F MICHAEL A. MANLEY 26721 DUBLIN WOODS BONITA SPRINGS	lable in Florida, enter alternate corporate name adopted for the purpose of transacting busin RK STATE 3. N/A (FEI number, if applicable) 88 (FEI number, if applicable) 98 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 98 (Principal office address) ND DISTRIBUTION OF POOL SUPPLIES 98 of corporation authorized in home state or country to be carried out in state of Florida) 99 et address of Florida registered agent: (P.O. Box NOT acceptable) MICHAEL A. MANLEY 26721 DUBLIN WOODS CIR., #1 BONITA SPRINGS Florida 34135	

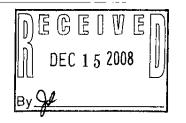
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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: GREGORY A. FREY			· · · · · · · · · · · · · · · · · · ·
Address: 25280 PELICAN CREEK CIRCLE			
BONITA SPRINGS, FL 34134			
Vice Chairman: JUDITH M. FREY			
Address: 25280 PELICAN CREEK CIRCLE			
BONITA SPRINGS, FL 34134			
Director:			
Address:			
			. <u> </u>
Director:			
Address:	至。	0	
	AHE -	JA!	(*************************************
B. OFFICERS	TAR) ASS	123	e programme e marchalas a a
President: GREGORY A. FREY	EE, F	A	
Address: 25280 PELICAN CREEK CIRCLE	S FA:	=	(J
BONITA SPRINGS, FL 34134	0.5		
Vice President: JUDITH M. FREY	-		
Address: 25280 PELICAN CREEK CIRCLE			
BONITA SPRINGS, FL 34134			
Secretary:			
Address:			
Treasurer:	-		
Address:			
1			
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	d/or direct	ors.	
13. (Signature of Director or Officer listed in number 12 of the application)			
CDECORY A EDEV CHAIRMAN & CEO			
(Typed or printed name and capacity of person signing application)		•	



State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of FREY TECHNOLOGIES, INC. was filed on 08/22/1988, under the name of THOMAS A. WELCH ASSOCIATES, INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment THOMAS A. WELCH ASSOCRATES: INC., changing its name to FREY TECHNOLOGIES, INC., was filed 03/20/1990.

The Biennial Statement is past due.

NE WITNESS my hand and the official seal of the Department of State at the City of Albany, this 10th day of December two thousand and eight.

Special Deputy Secretary of State

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