## F1900001840

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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4-15-19

## **COVER LETTER**

TO: Registration Section Division of Corporations		
ClearFlame Engines, In SUBJECT:	ic.	
<del></del>	lame of corporation	on - must include suffix
Dear Sir or Madam:		
The enclosed "Application by Forei "Certificate of Existence," or "Certi above referenced foreign corporatio	ficate of Good Sta	r Authorization to Transact Business in Florida," inding" and check are submitted to register the less in Florida.
Please return all correspondence cor Bernard Johnson	ncerning this matte	er to the following:
	Name of	Person
ClearFlame Engines, Inc.		
6520 Double Eagle Drive, Unit 527	Firm/Cor	npany
Woodridge, II. 60517	Addı	ress
bj@clearflameengines.com	City/State a	and Zip code
E-mail ad	dress: (to be used	for future annual report notification)
For further information concerning the	his matter, please	call:
Bernard Johnson	206	427-6404
Name of Person	at (	Daytime Telephone Number
STREET/COURIER ADDI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following  \$70.00 Filing Fee		S78.75 Filing Fee & S87.50 Filing Fee. Certified Copy 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.

(Enter name of "Inc.," "Co.," "Co	corporation: must include "INCORPORATED." orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
ClearFlame En	gines Corporation		
(If name unavai	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting b	
D. J.		-4067763	
(State or country under the law of which it is incorporated) October 3, 2016		(FEI number, if applicable)	
(Date of incorporation)  None yet		(Date of duration, if other than perpe	etual)
6520 Double Ead 7	(SEE SECTIONS 607.1501 & 607.1502, Figle Drive, Unit 527, Woodridge, IL 60517 (Principal	office address)	
	(Current mailing	address, if different)	79 -: S
3. Name and stre	<u>et addres</u> s of Florida registered agent: (P.C	) Boy NOT acceptable)	ZONO APS
Name:	John Howell	acceptable)	
Office Address:	82 Pine Blossom Trail	_	
	Saint Johns		?: <b>'</b> 3
	(City)	(Zip code)	

## 9. 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)

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Bernard Johnson Chairman: 1001 S State St, Unit 1103, Chicago, IL 60605 Address: Vice Chairman: \_\_\_\_\_\_ Address: Julie Blumreiter Director: 6520 Double Eagle Drive, Unit 527, Woodridge, IL 60517 Address: \_ Director: **B. OFFICERS** કેમાઉ Bernard Johnson 1001 5 State St, Unit 1103, Chicago, IL 60605 Address: Vice President: Julie Blumreiter Secretary: 6520 Double Eagle Drive, Unit 527, Woodridge, IL 60517 Treasurer: Address: \_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Bernard Johnson, President and CEO

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

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CLEARFLAME ENGINES, 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 EIGHTH DAY OF FEBRUARY, A.D. 2019.

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Authentication: 202225558

Date: 02-08-19