F2000003628

(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:

Office Use Only



600350536976

2020 7 19 F3 1:12







Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

FROM

To Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com

Melissa Stops mstops@incserv.com 850.656.7953

REQUEST DATE | 8/19/2020

850-245-6051

PRIORITY | Routine

OUR REF # (Order ID#) 847845

ORDER ENTITY_ ORIGINCLEAR, INC.

- -					•		
PLEASE P	PERFORM TH	E_FOLLOWING	SERVICES	 		 	
	CLEAR, INC.		-	 			

File the attached foreign qualification document and provide a certified copy as evidence.

NOTES: \$78.75 Authorized		:		 .
	annual report reminde	rs: jon@origincle	ear.com	
RETURN/FORWA ACCOUNT NUMBER	ARDING INSTRUCT R: 120050000052	ions:		
Please bill the above	ve referenced account	for this order.		

If you have any questions please contact me at 656-7956,

Sincerely

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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.

OriginClear, Inc.		" "COMBANY" "CODDODATION"	
	orporation: must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	"COMPANY, CORPORATION,	
If name unavail:	able in Florida, enter alternate corporate name		ness in Florida)
Nevada	3.	26-0287664	
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable	le)
6/1/2007	5.	(Date of duration, if other than pu	
(Date	of incorporation)	(Date of duration, if other than pu	erpetual)
Upon Filing			
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
3575 58th Street	North, Suite 200, Clearwater, FL 33760		
	(Principal off	ice <u>street</u> address)	
	(Current maili	ng address, if different)	
			21
Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	123
Name:	Tener Riggs Eckelberry		7
6 A d du-ac.	13575 58th Street North, Suite 200		<u> </u>
fice Address:	Clearwater	Florida 33760	ים.
	(City)	(Zip code)	
D 1.	43		70
Registered ag <i>avino heen nan</i>	ent's acceptance: ned as registered agent and to accept serv	vice of process for the above stated corp	oration at the pla
signated in this	s application. I hereby accept the appoint	ment as registered agent and agree to o	act in this capacity
rther agree to c d I am familiai	comply with the provisions of all statutes or with and accept the obligations of my pe	relative to the proper and complete per osition as registered ugent.	formunce of my d
	-3		

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.

A. DIRECTORS					
■ Chai m an	Name: Tener Riggs Eckelberry	□Chairman	Name: Anthony Fidaleo		
□Vice Chairman	OriginClear, Inc.	□Vice Chairman	OriginClear, Inc.		
Director	13575 58th Street North, Suite 200	Director	13575 58th Street North, Suite 200		
President	Clearwater, FL 33760	□President	Clearwater, FL 33760		
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	Treasurer		
□Other	Other	□Other	Other		
□Chairman	Name: OriginClear, Inc.	□ Chairman	Name: OriginClear, Inc. Address:		
□ Vice Chairman	Address:	□Vice Chairman	Address:		
■Director □President	Clearwater, FL 33760	☐ Director	Clearwater, FL 33760		
		□Vice President	· · · · · · · · · · · · · · · · · · ·		
Secretary	□Treasurer	☐ Secretary	□Treasurer		
Other	□ Other	Other	□Other		
			Name:		
□Chairman _	Name:	Chairman	170		
□Vice Chairman	Address:		Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President	•••		
□Secretary	□Treasurer	☐ Secretary	☐ Treasurer		
Other	☐ Other	□Other	□Other		
The officer or dire she is aware that to s.817.155, F.S.	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Department Signature of Director of Signature of Director of ector signing this document (and who is listed in number false information submitted in a document to the Department of	nt of State Annual Rorr Officer r 11 above) affirms the	eport form. hat the facts stated herein are true and that he or		
13. Tener Riggs !	Eckelberry, President				

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ORIGINCLEAR, INC., as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 06/01/2007, and is in good standing in this state.

Certificate Number: B202008181012426

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 08/18/2020.

BARBARA K. CEGAVSKE
Secretary of State