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W23-18466 SR

COVER LETTER

TO: Registration S Division of C				
SUBJECT: VOLT	OIL RECOVERY, INC	<u>.</u>		
	Name of	corporation - n	nust include suffix	
Dear Sir or Madam:				
	nce," or "Certificate o	of Good Standin	horization to Transact I g" and check are submi n Florida.	
Please return all corre	spondence concernin	g this matter to	the following:	
A. J. STANTON, JR.				
		Name of Per	son	
A. J. STANTON, JR., I	' A			
		Firm/Compar	ny	
P. O. BOX 560024				
		Address		
ORLANDO, FL 32856				
		City/State and	Zip code	
JAY@AJSTANTON.L		· · ×		
	E-mail address:	(to be used for t	uture annual report not	ification)
For further information	n concerning this ma	tter, please call:		
A. J. STANTON, JR.		407	908-9195	
Name of Per		Area Code	Daytime Telephor	ne Number
Registration (Division of C The Centre of	orporations Tallahassec roe St <u>reet, Suite</u> 810		MAILING ADI Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations
Enclosed is a check for Please make check paya ☐ \$70.00 Filing Fee		PARTMENT OF Fee &		■ \$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.	VOLT OIL RECOVERY, INC.			
		orporation; must include "INCORPORATEI orp," "Inc." "Co," or "Corp.")	D." "COMPANY," "CORPORATION,"	
	[THIS NAME I	S CURRENLY AVAILABLE		
	(If name unavail:	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Flo	orida)
2.	Delaware	•	(applied for)	
~	(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
4.	May9, 2022	5	Perpetual	
••	(I)ate	of incorporation)	(Date of duration, if other than perpetual)	_
6.	(No business	has been commenced anywhere]		
ν.		*	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
7	9480 E. Colonial	Drive Orlando, Fl. 32817		
•		(Principal o	flice street address)	
	P. O. Box 56002	4 Orlando FL 32856		ب
		(Current mail	ling address, if different)	7
8.	Name and stree	et address of Florida registered agent: (P	.O. Box <u>NOT</u> acceptable) .	· · · · ·
	Name:	August J. Stanton Jr.		
Ω	ffice Address:	9480 E Colonial Drive		- · - 5.
J	mee maness.	Orlando	, Florida 32856	0
		(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.

A. DIRECTORS						
□Chairman	Name: RAJEEV HARISH KOTHARI	□ Chairman	Name: RAHUL SINGHANIA			
□Vice Chairman	Address: VILLA 6587 / A, STREET 15	□Vice Chairman	Address: BUILDING 1090, WAY 4020			
Director	MADINAT AL ILLAM	Director	FLAT 66, POST BOX 879			
□President	POST BOX 3049, RUWI	□President	POSTAL CODE 100, MUSCAT, OMAN			
□Vice President	POSTAL CODE 112, OMAN	□Vice President				
■ Secretary	□Treasurer	☐ Secretary	Treasurer			
□Other	□Other	Other	Other			
□ Chairman □ Vice Chairman ■ Director □ President □ Vice President □ Secretary □ Other	GOLF COURSE EXTENSION ROAD SECTOR 60, GURUGRAM 122001 HARYANA, INDIA	☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President ☐Secretary ☐Other	August J. Stanton, Jr. 9480 E Colonial Dr Orlando, FL 32856			
□ Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	Secretary	□Treasurer			
Other	Other	□Other	□Other			
Important Notice: Use an attachment to report more than six 1672 The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. 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. August J. St	tanton, Jr., President and Attorney					
• • • • • • • • • • • • • • • • • • • •	Planul or printed name and apposite of	naryan cianina analiastica	\			

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "VOLT OIL RECOVERY, 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 TWENTY-SECOND DAY OF FEBRUARY, A.D.

2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VOLT OIL RECOVERY, INC." WAS INCORPORATED ON THE NINTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

The state of the s

Authentication: 202762028

Date: 02-22-23

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