F950000683

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

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9 15 0000

SUBJECT:	(Name of corporation - must include su	rffix)	
Dear Sir or Madam:			
Florida", "Certificate		r Authorization to Transact Business li bmitted to register the above referenced	
Please return all corres	pondence concerning this matter	to the following:	
	Enc. Kyllo (Name of Person)		
	Retrofit Recycling, Inc	95 F	
	(Firm/Company)		
	(Address)		

Should you need to call someone concerning this matter, please call:

(City, State and Zip Code)

Fric Kyllo at (507) 455 - 2181 .

(Name of Person) Area Code & Daytime Telephone Number

Divintorina MN 55060

nita

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 30, 1995

ERIC KYLLO RR 1 BOX 41B OWATONNA, MN 55060

SUBJECT: RETROFIT RECYCLING, INC.

Ref. Number: W95000002075

55 FED -9 FJ 2: 19

We have received your document for RETROFIT RECYCLING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

Number 6 of the application must be completed. If the corporation has not transacted business or conducted its affairs in Florida because it has not received confirmation from this office, please insert the words "upon qualification" in lieu of a date.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6097.

Michael Mays Corporate Specialist

Letter Number: 395A00003807

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. Petro() + Pecucling Inc. (Name of corporation: must include the word "NCORPORATED", "COMPANY", "CORPOR abbreviations of like import in language as will clearly indicate that it is a corporation inst or partnership if not so contained in the name at present.)	ATION* or words or pad of a natural person
2. <u>Mariticals</u> (State or country under the law of which it is incorporated) 3. <u>41 - 179.785</u> (FEI number, if applical	
4. 12-15-94 5. Atrochia (Duration: Year corp. will cease to e	vist or "neroMital"
	~m
6. /-3-95 (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)	17i 25 1
7. <u>RRI Box 41B</u>	$oldsymbol{\omega}_{i_1,\ldots,i_{m+1}}$
	72
<u>Durchinga MN 550(d)</u> (Current mailing address)	25
	O , , ,
8. Tonesport Augrescent langs for Receiving. (Purpose(s) of corporation authorized in home state or country to be carried out in the	
9. Name and street address of Florida registered agent: Name: <u>Brian Mercitl</u>	
Office Address: 120 Gold Find Dr. Apt 7	
Plant City , Florida ,	(Zip Code) 335/c/c
IO. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process of corporation at the place designated in this application, I hereby accept begistered agent and agree to act in this capacity. I further agree to comply of all statutes relative to the proper and complete performance of my dutient that accept the obligations of my position as registered agent.	the appointment as with the provisions
(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 addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Michael Noble 28 200	
Address: PPI Box III B	
Dustonna MN 55060	
Vice President: Steve Kath	
Adoress: PRI Box 411B	
Chedrina Mr. 55060	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office and/or directors.	rs
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	

Greve KATH Vice Presiseur

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

14.

State of Minnesota

3963

SECRETARY OF STATE

CERTIFICATE OF INCORPORATION

I, Joan Anderson Growe, Secretary of State of Minnesota, do certify that: Articles of Incorporation, duly signed and acknowledged under oath, have been filed on this date in the Office of the Secretary of State, for the incorporation of the following corporation, under and in accordance with the provisions of the chapter of Minnesota Statutes listed below.

This corporation is now legally organized under the laws of Minnesota.

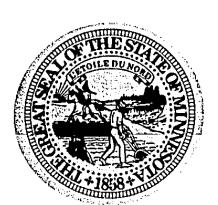
Corporate Name: Retrofit Recycling, Inc.

Corporate Charter Number: 8M-360

Chapter Formed Under: 302A

This certificate has been issued on 12/15/1994.

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Joan anderson Grove Secretary of State.

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