PLEASE READ ALL INSTRUCTIONS BEFORE C	COMPLETING THIS FORM.
APPLICATION FLORIDA DEPARTMENT OF STATE	
FOR Sandra B. Mortham Secretary of State	
DIVISION OF CORPORATIONS	FILED
DOCUMENT # F 950000 4339 1. Corporation Name	96 DEC -3 PM 12: 03
Emerald Green, Inc	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business Mailing Address	Cas AIR want
11/20 Raymond Diehl Rd Ste A-5	12/3/94
Tallohassie, 71 32308	TALLAHASSEE, FLORIDA Was peinstatement for wow 12/3/94 Vinus 12/3/94
If above addresses are incorrect in any way, line through incorrect information and enter correction below.	DO NOT WRITE IN THIS SPACE
1 New Principal Office Address, If Applicable 13. New Mailing Address, If Applicable 1090 Roumond Diehold.	Date incorporated or Qualified To Do Business in Florida
Suite, Apt. #, etc. U	5. FEI Number Applied For
City State Ollahasse H. Tollahasse H.	59 33 78 737 Not Applicable
Zip 32308 Country USA Zip 32308 Country USA	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at leas	st 3 directors)
Title(s) 1 Name of Officers and/or Directors Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Nu	mbers) 4 City / State / Zip
Pres Ocelus Starr Tallahans	T
VO Vinto TCL 2000-1	32308 Alaboroce, Ha 32305
V.Y. Kimberly J. Starr 2058 Florida A	re Tallahasse, Hazzza
	·
	8000020203180
	-12/05/9601003003 ****200,00 ****200,00
8. Name and Address of Current Registered Agent	D. Name and Address of Name
Kimberly J. Starr Name hoe	9. Name and Address of New Registered Agent
2058 Florida Ale Sipol Address 190	len Starr D. Bh) Number is Not acceptable) Len Starr D. Bh) Number is Not acceptable) Len Starr D. Bh) Number is Not acceptable) Len Starr D. Bh) Number is Not acceptable)
Tallahasser, 71 32303 Suite, Apr. #, Elg.	umond Diele Rd
City L 10 1	State Zip Code
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the oblig	State Zip Code FL 32308
Signature of Registered Agent Date U/28/96	
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on Intangible tax.)	
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I receitify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	