FM000006599 TRANSMITTAL LETTER

	Qualification/Tax Lien Section Division of Corporations			
SUBJE	CT: <u>Emerald Solut</u> (Name of con	poration - must include suffix	<u>c.</u>)	ा क् रायक्त
	ir or Madam:			. = .
"Certifito to trans	closed "Application by Foreign Corporaticate of Existence", and check are submisact business in Florida.	ned to register the above rever		:31
Please	return all correspondence concerning thi		0000306332 -12/07/990107/ ******87.50 ***	5005 ***87.50
	Gregory S. R		: <u></u>	
	Emerald Sol	utions Group, II	<u>JC.</u>	
	4264 Central	Sarasota Pkw (Address)	4 # 116	
	SARASOTA, F	City/State/Zip)	1. 1/A/A LUI	00
Shoul	ld you need to call someone concerning	this matter, please call:	,	
64	Cory S Roper at (Name of Person)	(Area Code & Daytime Tel	ephone Number)	FIL 9 NFC 22
STR	EET ADDRESS:	MAILING ADD	RESS:	
Qual Divi 409	lification/Tax Lien Section ision of Corporations E. Gaines St. ahassee, FL 32399	Qualification/Tax Division of Corpo P.O. Box 6327 Tallahassee, FL	orations	
Enc	losed is a check for the following amoun	t:	•	
- 5	\$70.00 Filing Fee		\$ \$87.50 Filing Fee Certificate of Sta Certified Copy	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 14, 1999

GREFORY S. ROPER EMERALD SOLUTIONS GROUP, INC. 4264 CENTRAL SARASOTA PKWY #116 SARASOTA, FL 34238

SUBJECT: EMERALD SOLUTIONS GROUP, INC.

Ref. Number: W99000028482

We have received your document for EMERALD SOLUTIONS GROUP, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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 (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 799A00058655

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

TO LOUIS SURMITTED TO	
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO	
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOW INC. IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE STATE OF FLORIDA. REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
REGISTER A PUREIGIT COID OF THE	
1. Emerald Solutions Group, INC. 1. Emerald Solutions Group, TNC. COMPANY", "CORPORATION" or	p h :
1. Free Cald Solutions Of Out Components of State of Stat	
(Name of corporation; must include the word "INCORPORATED", "COMPANY", CONTROL (Name of corporation; must include the word "INCORPORATED", "COMPANY", CONTROL (Name of corporation; must include the word "INCORPORATED", "COMPANY", COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED", "COMPANY (Name of corporation; must include the word "INCORPORATED") (Name of corporation; must include the word "INC	
words or abbreviations of like import in language as with occurs, natural person or partnership if not so contained in the name at present.)	
natural person or parmership it not so continue	
2. Delaware USA. (State or country under the law of which it is incorporated) 4. Delaware USA. (State or country under the law of which it is incorporated) 5. Deroltual (Duration: Year corp. will cease to exist or "perpetual")	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Marian Same
2. (FEI number, if applicable)	
(State or country under the law of which the	
5. <u>Verper ("per per per per per per per per per per </u>	
4. (Duration: Year corp. will cease to exist of perpetual)	
(Date of incorporation)	
12 10 00	7-1907
6. 2 0 99 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
(Date first transacted business in Floridae)	
7. 4264 Central SprasotA Pkny # 116	ing they have the
7. 4264 PHILA	
5 DRASOFA FL 34238	**
(Current mailing address)	·
(02.02	
May lawful act or activity	- · · ·
8. Any Awful act of activity to be carried out in state of Florida) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
(Purpose(s) of corporation audiorized in notice state	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
9. Name and street address of Florida registered agent: (P.O. Box of Mail Diop Box NOT and	
Name: Gregory S Roper Name: Gregory S Roper Name: Same Alaria Sama Alaria Row # 116	
Name: Olegoly O Poper	Ţ -
Blow # 116	, tū
Office Address: 4264 (portra) OROBSONO RECO	: 0
Office Address: = 34738	•
Office Address: 4264 Central Spaces Ata Rhuy # 116 Spaces Address: Spaces Ata Rhuy # 116 (Zip code)	
(Zip code)	-
ı **	
a contones	
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process for the above stated corporation at the place design the law in this capacity. I further agree to a complete the appointment as registered agent and agree to act in this capacity. I further agree to a complete the appointment as registered agent and agree to act in this capacity.	gnatea in
Having been named as registered agent and to accept service of process for the above stated corporation at the place to a complete the appointment as registered agent and agree to act in this capacity. I further agree to a this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further relative to the proper and complete performance of my duties, and I am familiar with an	сотріу
Having been named as registered agont ment as registered agent and agree to act in this capacias. I further agree this application, I hereby accept the appointment as registered agent and agree to act in this capacia. The provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with an acceptance of the proper and complete performance of my duties, and I am familiar with a proper and complete performance of my duties.	ia accept
with the provisions of all statutes relative to the proper and competed payers	
the obligations of my position as fegistered agent.	
Thomas Olar	
with the provisions of all statutes relative to the obligations of my position as figisfered agent. (Registered agent's signature)	
(Registered agent's signature)	
1 there of this application to the	e
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 Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the Department of State, by the Secretary of State or other official having custody of corporate records in the Secretary of State or other official having custody of Secretary or other official having custody of Secretary or other official having custody of Secretary or other official having custody or other o	the law of
Department of State, by the Secretary of State or other official naving custody of State, by the Secretary of State or other official naving custody of State, by the Secretary of State or other official naving custody of State, by the Secretary of State or other official naving custody of State, by the Secretary of State or other official naving custody of State, by the Secretary of State or other official naving custody of State or other official naving custody of State or other official naving custody or other official n	
Dopument	

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

	Gregory 5 Roper	• "
Address:	4624 Central Sprosofo Pkuy #16	- 12
	Sorasota, FL. 34238	
Vice Chairma	n:	, ,.
		· · · · · · · · · · · · · · · · · · ·
Director:		= = =
Address:		
		t ⊒ur:
Director:		
Address:		····
	The Court II and the P.O. Por NOT acceptable)	k?- ••
	ERS (Street address only - P.O. Box NOT acceptable)	
President: _	Gregory S Roper 4824 Central Sprosson Akwy # 116	<u> </u>
Address:	Complete Cl 31/200	
_	SARASOTA, FL. 34238	<u> </u>
Vice Presid	nt:	. :::
Address: _		-2g ¹
_		
		-
Secretary:	2. 22	. ".
Secretary:	7 22 L 22 N	. ".
•	22 M O	. ".
•	22 M O: 14	
Address: _		. ".
Address:		. ".
Address:		
Address: Treasurer: Address: _		

State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMERALD SOLUTIONS GROUP, 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 TWENTIETH DAY OF DECEMBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EMERALD SOLUTIONS GROUP, INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 1999

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

AUTHENTICATION:

12-20-99

.0151689

3116677 8300

991548312