

Division of Corporations Public Access System

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L. SELLERS

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Division of Corporations

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**EXAMINER** 

From:

Account Name ; C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

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#### Enhanced Biofuels & Technologies (USA), LLC

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SECRETARY OF STATE
AND ABASSITE FLORIDA

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO

CUMPLIAN ATTED LIAR	VCE WITH SECTION 608303, FLORIDA S VLITY COMPANY TO TRANSACT BUSINESS	TATUTES, TE INTHE STAT	IE FOLLOWING IS SUBMITTED TO RECESTER A FR EOFFLORIDA:	OREIGN	
	•		ogies (USA), LLC		
(Name	of Foreign Limited Liability Company; ma	ist include "L	Imited Liability Company," "LL.C.," or "LLC.")	=	
Sont of the	illable, outer alternate name adopted for the munugers or managing members adopting .L.C.," "LLC.")	c purpose of t the alternate (	ransacting business in Florida and attach a copy of the name. The alternate name must include "Limited Liabi	written lity	
	Dalaware	3.	26-4839545		
lurisdiction Ompany is c	Otherware under the law of which foreign limited ha organized)	bilicy	(FEI number, if applicable)	•	
	5/7/09	5.	perpetual		
	(Date of Organization)	· <u>(</u> I	Ourailon; Year ilmited liability company will coast to the or "perpetual")	-	
Upon c	qualification				
	(Date first transacted busines (See sections 608.501 & 608.5	s in Florida, i 02 F.S. to do	f prior to registration.) ermine penalty liability)	_	
128 S. Shor	District No. of the Control			-	
	TO D 27 YO . 3 M 23 OM PL 34234				
f limited			cipil Office)	-	
The name	(Street A	naged comp c managing	, , , , , , , , , , , , , , , , , , ,		
he name Fimothy J.	(Street A liability company is a manager-man and usual business addresses of the Morris, Manager 328 S. Shore Dri an original certificate of existence, no more from the law of which it is creamled. (A ph	naged comp to managing two, Saraso	namy, check here   members or managers are as follows:  ta, FL 34234  i, duly authoriteated by the official having custody of no accertable. If the certificate is in a factor language, a	- conds in	·
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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

If name unavailable, the alternate name to be used in the state of Florida is:										
2. The name and th	e Florida street address	of the registered as	cut and office are:	<u> </u>						
		Timothy I. Morris								
<del>,</del> -		(Name)								
	;	128 S. Shore Drive								
	Plorida Street Add	frees (P.O. Box NOT	ACCEPTABLE)							
	Sarasota	βĬ.	34234							
_		City/State/Zip								
liability company at agent and agree to a relating to the prope öbligations of my po	the place designated in t ct in this capacity. I furt r and complete performa	his certificate, I her her agree to comply ince of my duties, a t as provided for in	process for the above stated eby accept the appointment of with the provisions of all sta ad I am familiar with and acc Chapter 608, Flortda Statute	is registered itutes cept the						
	Sentuol	<del></del>								
	\$ 100.00									
	\$ 25.00	Designation of	Registered Agent							

5.00 Certificate of Status (optional)

# Delaware

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENHANCED BIOFUELS & TECHNOLOGIES (USA), LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF MAY, A.D. 2009.

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

4684576 8300

090441607

jetticy W. Bullock, Secretary of State TION: 7290504 CATION:

DATE: 05-08-09