## P12.00036086

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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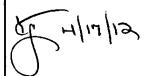


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## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Emerald Bay Environ Technologies, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 \$70.00 \$78.75 \$78.75 Filing Fee Filing Fee Filing Fee, Filing Fee Certified Copy & Certificate of Status & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Vancleft Vollmer Name (Printed or typed) 904 68th Ave West Address Bradenton, Florida 34207 City, State & Zip 646-306-4126 Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I No.	AME Emerald Bay Environme	ental Technologies, Inc	SECRETARY OF STA JIVISION OF CORPORA
· •	RINCIPAL OFFICE		
ARTICLE II P	Principal street address	Mailing address	12 APR 16 PM 3:
	1 68th Ave West		
Bra	denton, Florida 34207		
The purpose for which	TRPOSE: the the corporation is organized is:		
	ote technologies relating to environs	mental remediation of s	oil, ground water,
surface water a	and air pollution resulting from the e	missions of the 'internal	combustion engine'.
	mote other products of interest to m		
energy generat	ion.		
ARTICLE IV S	HARES		
	of stock is: 100 no par shares		
	NITIAL OFFICERS AND/OR DIRECTOR		
	Van Vollmer, SrPresident		
Address:	904 68th Ave West Bradenton , Florida 34207		<del></del>
	Pracerion , Pionoa 34207		
Name and Title	::Carl S. Vollmer-Sec/treasurer	Name and Title:	
Address:	134 McGuinness Blvd	_ Address:	
•	Brooklyn, New York 11222	<del>-</del>	
ar teru		1004	
Name and Title		Name and Title:	
Addices.			
		_	
	EGISTERED AGENT		
The <u>name and Florio</u> Name:	ia street address (P.O. Box NOT acceptable) o Maxwell Tax & Accounting, Inc		
	1011 F Norvell Bryant Hwy	<del></del>	
	Hernando, Fl 34442	<del></del>	
ARTICLE VII I	NCORPORATOR		
	ess of the Incorporator is:		
Name: Address:	Van Vollmer	<del></del>	
Address:	904 68th Ave West Bradenton, Florida 34207	<b>-</b> - ·	
Having heen named	as registered agent to accept service of proces	s for the above stated corporate	ion at the place designated in
	familiar with and accept the appointment as reg		
(Ran V)	Naxwell		2/2//200
1/2011	Required Signature/Registered Agent	<u></u>	Date
I submit this door	ent and affirm that the facts stated herein are	o true. I am aware that the fals	/ se information submitted in a
document to the Dep	ent and affirm that the facts stated herein are artment of State constitutes a third degree felor	y as provided for in s.817.155, i	F.S.
( ) may 8 /	Dan on		osh hon

Required Signature/Incorporator