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#### **COVER LETTER**

TO:	New Filing Section Division of Corporations					
SUBJI	ECT:	SEBA	STIAN (2008) LIM	MITED	· •••	
				tion - must include suffix	A Company of the Comp	
Dear S	іг ог М	adam:			· · · · · · · · · · · · · · · · · · ·	
"Certifi	icate of	Existence		for Authorization to Transact Standing" and check are subm siness in Florida.		
Please	return a	all corresp	ondence concerning this ma	atter to the following:		
MICH	HAEL	_ HALL				
	,		Name	of Person		
SEB	BAST	IAN (2	008) LIMITED			
			<del></del>	Company		
114	MEL	TON A	AVENUE			
			A	ddress		
SEB	ASTI	AN, FL	32958			
			City/Sta	te and Zip code		
mhall	lseba	stian@a	aol.com			
			E-mail address: (to be us	sed for future annual report no	tification)	
For fur	ther inf	formation (	concerning this matter, plea	se call:		
Micha	ael H	lali	at ( 772	2 <sub>)</sub> 696 1287		
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			ion porations Center Circle	New Filing Sect Division of Corp P.O. Box 6327	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclose	ed is a	check for t	he following amount:			
<b>✓</b> \$7	70.00 F	iling Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	



## RECEIVED 12 FEB 21 AH 10: 33

## FLORIDA DEPARTMENT OF STATE ISLEN OF CORPORATIONS

February 13, 2012

MICHAEL HALL 114 MELTON AVE SEBASTIAN, FL 32958

SUBJECT: SEBASTIAN (2008) LIMITED

Ref. Number: W12000008506

We have received your document for SEBASTIAN (2008) LIMITED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 912A00006439

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		STATUTES, THE FOLLOWING IS SUBMITTED TO  BUSINESS IN THE STATE OF FLORIDAY.	¥
	008) Limited CORP	PEB LAH.	
(Enter name of c	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")		
(If name unavail	ship in Filmida anto shamata		
		ne adopted for the purpose of transacting business in FIbrida)	
2. Delaware	under the law of which it is incorporated)	26-3186963	
,		(FEI number, if applicable)	
4. August 13, 2	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
,	or incorporation)	(Duration: Tear corp. will cease to exist of perpetual)	
6. None	Opt Saturday 4 Hari	1 Plust 10 3 14 41	
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
7. 114 Melton	Avenue, Sebastian, FL 3295	88	
	(Principal office ad	<del></del>	
114 Meltor	Avenue, Sebastian, FL 32	958	
	(Current mailing ad	ldress)	
C	and Dankan		
8. Second Ha			
(Purpose(s	) of corporation authorized in home state or	country to be carried out in state of Florida)	
9. Name and stree	t address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Michael Hall		
Office Address:	114 Melton Avenue		
	Sebastian	Florida 32958	
	(City)	(Zip code)	
10. Registered ag	ent's acceptance:	• • • • • • • • • • • • • • • • • • •	
designated in this further agree to co	application, I hereby accept the appoint	vice of process for the above stated corporation at the pla tment as registered agent and agree to act in this capacit relative to the proper and complete performance of my d osition as registered agent.	ty. I
	MASS	_	
	Registered agent's signature	)	
11. Attached is a c	ertificate of existence duly authenticated	I, not more than 90 days prior to delivery of this application	on 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 business addresses of officers and/or directors.  A. DIRECTORS	
A. DIRECTORS	
Chairman:	
Address:	
	to the second se
Vice Chairman:	SECO.
Address:	AHAAA EB 2
Director:	F 3 0
Address:	<u>*</u> 20 €
Director:	
Address:	
B. OFFICERS	
President: Michael Hall	
Address: 114 Melton Avenue	
Sebastian, FL 32958	
Vice President: Gillian Hall	
Address: 114 Melton Avenue	
Sebastian, FL 32958	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition 13.	ional officers and/or directors.
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 abov are true and that he or she is aware that false information submitted in a document third degree felony as provided for in s.817.155, F.S.	5
14. Michael Hall, President	

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

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SEBASTIAN (2008) LIMITED, A DELAWARE LIMITED PARTNERSHIP" 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 SIXTH DAY OF FEBRUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SEBASTIAN"

(2008) LIMITED, A DELAWARE LIMITED PARTNERSHIP" WAS FORMED ON

THE THIRTEENTH DAY OF AUGUST, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

12 FEB 21 PM 2: 05
SECRETARY OF STATE

4587354 8300

120128714

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 9345868)

DATE: 02-06-12

You may verify this certificate online at corp.delaware.gov/authver.shtml