

F13000005240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

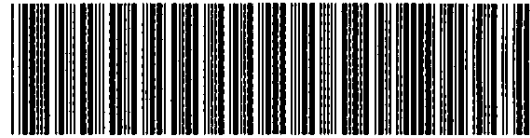
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900253923349

11/18/13--01038--009 \*\*160.00

W13-64106

DEC - 9 2013

J. BRYAN



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 20, 2013

SHERITA T DOUGLAS  
2180 SE TRILLO STREET  
PORT SAINT LUCIE, FL 34952

SUBJECT: S.T. DOUGLAS COMPANY LIMITED  
Ref. Number: W13000064106

We have received your document for S.T. DOUGLAS COMPANY LIMITED and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Verify if this is a Corporation or LLC. The certification has Certificate of Incorporation. If this is a Foreign Limited Liability Company send a letter stating that it is a Foreign Limited Liability Company.

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) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 513A00026799

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** S.T. DOUGLAS COMPANY LIMITED

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SHERITA T DOUGLAS

Name of Person

S.T. DOUGLAS COMPANY LIMITED

Firm/Company

2180 SE TRILLO STREET

Address

PORT SAINT LUCIE, FLORIDA, 34952

City/State and Zip code

sherita1671@gmail.com

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

For further information concerning this matter, please call:

Sherita T Douglas at ( 772 ) 919-1296

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

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee       \$78.75 Filing Fee & Certificate of Status       \$78.75 Filing Fee & Certified Copy       \$87.50 Filing Fee, Certificate of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. **S.T. DOUGLAS COMPANY LIMITED, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

**S.T. DOUGLAS COMPANY, INC**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Republic Of Ghana**

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. **8th day of October 2013**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **2180 SE Trillo Street, Port Saint Lucie, Florida, 34952**

(Principal office address)

**Same as above**

(Current mailing address)

8. **General Merchants, Import and Export of General Goods**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Sherita T Douglas**

Office Address: **2180 SE Trillo Street**

**Port Saint Lucie**, Florida **34952**

(City)

(Zip code)

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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

*Sherita T. Douglas*

(Registered agent's signature)

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 law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Sherita T Douglas  
Address: 2180 SE Trillo Street  
Port Saint Lucie, Fl, 34952

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Rexford Kabutey Fayorsey

Address: J837 Addo Gonno NR Lekma Polyclinic,  
Teshie Nungua, Accra

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Sherita T Douglas  
Address: 2180 SE Trillo Street  
Port Saint Lucie, Florida, 34952

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Rexford Kabutey Fayorsey

Address: J837 Addo Gonno NR Lekma Polyclinic, Teshie Nungua, Accra

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Sherita T Douglas* Signature of Director or Officer

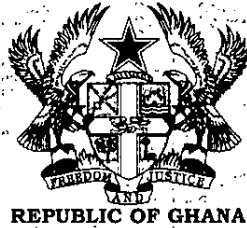
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Sherita T Douglas, Chairman, President

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

CS286632013

C0002690845



The Companies Act, 1963, Act 179

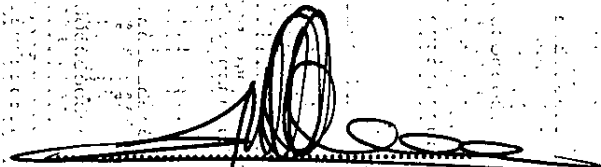
**CERTIFICATE TO COMMENCE  
BUSINESS**

**I hereby certify that**

**S.T. DOUGLAS COMPANY LIMITED**

having complied with the provision of Sections 27 and 28 of the  
Companies Act, 1963, Act 179 is entitled to commence business  
with effect from **14<sup>th</sup> day of October 2013**

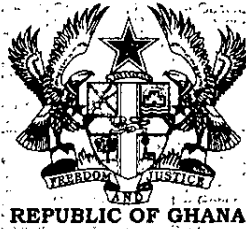
Given under my hand at Accra this **14<sup>th</sup> day of October 2013**



**For: Registrar of Companies**

CS286632013

C0002690845



# Certificate of Incorporation

I hereby certify that

**S.T. DOUGLAS COMPANY LIMITED**

is this day incorporated under the Companies Act, 1963 (Act 179) and that the liability of its members is limited.

Given under my hand and official seal at Victoriaborg, Accra,  
this 8<sup>th</sup> day of October 2013

For: Registrar of Companies

: (b)  
 : (c)  
 ii. Mobile No. : (a) 233244364934  
 : (b) 2337729191296  
 : (c)  
 iii. Fax No. :  
 iv. E-mail :  
 v. URL :

**Part-V Company Officer's Details**

TIN	Name	Address	Nationality	Date of Birth	Designation
P0002666030	REXFORD KABUTEY FAYORSEY	J837, ADDO GONNO NR LEKMA POLYCLINIC, TESHIE NUNGUA, GREATER ACCRA,	GHANAIAAN	12/04/1977	Secretary
P0002666065	SHERITA TIRELL DOUGLAS	2180, SOUTH EAST TRILLO STREET, PORT ST, LUCIE FLORIDA	US	06/01/1971	Director
P0002666030	REXFORD KABUTEY FAYORSEY	J837, ADDO GONNO NR LEKMA POLYCLINIC, TESHIE NUNGUA, GREATER ACCRA,	GHANAIAAN	12/04/1977	Director

**Part-VI Audit Firm**

i. TIN :  
 ii. Registration No :  
 iii. Name :  
 iv. Address :

**Part-VII Capital Details**

i. Currency of Capital	USD				
ii. Authorized Shares	1,000,000				
iii. Amount of Stated Capital	600,000				
iv. Issue Shares	600,000				
v. Issue of Shares		Paid	Unpaid	Due	Yet to be paid
a. Ordinary Shares	600,000	0	0	0	0
b. Preference Shares	0	0	0	0	0
c. Debenture	0	0	0	0	0
vi. Treasury Shares	0				

**Part-VIII Shares Allotment**

TIN	Name	Address	Shares Allotted	Consideration Payable in Cash (GHc)
P0002666065	SHERITA TIRELL DOUGLAS	2180, SOUTH EAST TRILLO STREET, PORT ST, LUCIE FLORIDA	600,000	600,000.00

**Part-IX RGD Comments**



Registrar-General's Department  
Accra-Ghana

Date: 14/10/2013

FORM "3"

THE COMPANIES ACT, 1963 (ACT 179)

**Subject: Company Limited by Shares Profile**

**Part - I Company Details**

**New Company Details**

Company Registration No : CS286632013  
Company Type : Limited Liability  
Company Name : S.T. DOUGLAS COMPANY LIMITED  
TIN : C0002690845  
Incorporation Date : 04/10/2013  
RGD Office : RGD-ACCRA (HQ)  
Principal Activity : GENERAL MERCHANTS,IMPORT AND EXPORT OF GENERAL GOODS  
Commencement Date : 14/10/2013  
Nature of Business : GENERAL MERCHANTS,IMPORT AND EXPORT OF GENERAL GOODS

*Certified True Copy*

**Part - II Industrial Classification**

ISIC Code	Description	Primary
4773	Other retail sale of new goods in specialized stores	Yes

**Part-III Address Details**

**Principal Place of Business**

House/ Building/ Flat Number : HNO. J837/9  
Street/ Land Mark : ADDO GONO TESHIE-NUNGUA  
City : ACCRA  
Region : GREATER ACCRA  
P.O.Box/ PMB/ DTD : P.O. BOX OS 0890,OS-ACCRA  
Country : Ghana

**Registered Address**

House/ Building/ Flat Number : HNO. J837/9  
Street/ Land Mark : ADDO GONO TESHIE-NUNGUA  
City : ACCRA  
Region : GREATER ACCRA  
P.O.Box/ PMB/ DTD : P.O. BOX OS 0890,OS-ACCRA  
Country : Ghana

**Part-IV Contact Details**

THE COMPANIES ACT, 1963 (ACT 179)  
DECLARATION THAT CONDITIONS OF SECTION 28 OF THE COMPANIES ACT,  
1963, (ACT 179) HAVE BEEN COMPLIED WITH

S.T. DOUGLAS COMPANY LIMITED

Presented by: .....

To the Registrar of Companies. P.O. Box 118 Accra.

**S.T. DOUGLAS COMPANY LIMITED**

being Directors and Secretary respectively of S.T. DOUGLAS COMPANY LIMITED

do solemnly and sincerely declare: -

That there has been paid to the Company for the issue of its shares consideration to the value of at least five hundred Ghana Cedis, of which at least one hundred Ghana Cedis have been paid in cash within the meaning of section 45 of the Companies Act.

And we make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act, 1971.

*Certified True Copy*

REXFORD KABUTEY FAYORSEY

Secretary

Signed

REXFORD KABUTEY FAYORSEY

Director

Signed

SHERITA TIRELL DOUGLAS

Director

Signed

Declared at 14<sup>th</sup> the

day of October 2013

before me

To be signed by all Directors and Secretary of the Company.

S. K. AMARTEY  
Commissioner of Oaths



# Ghana Revenue Authority

## Certificate of Registration

TIN P0002666065

This is to certify that

MS SHERITA TIRELL DOUGLAS

has been duly registered as a taxpayer  
under the Taxpayers Identification Numbering System Act 2002 (ACT 632)

Address

2180 SOUTH EAST TRILLO STREET  
PORT ST United States

Issuing Office

RGD - OFFICE

Date of Issue

03/10/2013

A handwritten signature in black ink, appearing to read "George Blankson", is written over a horizontal line.

**GEORGE BLANKSON**  
**COMMISSIONER GENERAL**



# Ghana Revenue Authority

## Certificate of Registration

TIN P0002666030

This is to certify that

MR REXFORD KABUTEY FAYORSEY

has been duly registered as a taxpayer  
under the Taxpayers Identification Numbering System Act 2002 (ACT 632)

Address

J837 ADDO GONNO NR LEKMA POLYCLINIC  
TESHIE NUNGUA Ledzekuku-Krowor municipal Ghana

Issuing Office

RGD - OFFICE

Date of Issue

03/10/2013

GEORGE BLANKSON  
COMMISSIONER GENERAL