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(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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COVER LETTER

TO: Registration Section Division of Corporations Ancient Mariner, Inc		
SURIECT:		over include suffix
N	ame of corporation -	must menue surrix
Dear Sir or Madam:		And the second of the second o
The enclosed "Application by Foreign "Certificate of Existence," or "Certificate of Existence	ficate of Good Stanc	authorization to Transact Business in Florida," ing" and check are submitted to register the s in Florida.
Please return all correspondence cor Jessica Cann	ncerning this matter	to the following:
	Name of P	erson
Ancient Mariner, Inc.		
	Firm/Comp	pany
PO Box 1277		
	Addre	
Monroe, NC 28111		
	City/State ar	d Zip code
admin@ancientmarinersigns.com		
E-mail a	ddress: (to be used f	or future annual report notification)
For further information concerning	this matter, please c	all:
Jessica Cann	704 at (635-7911
Name of Person	Area Cod	
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following	ng amount:	
	5 Filing Fee & C ficate of Status	1 \$78.75 Filing Fee & S87.50 Filing Fee. Certified Copy Certificate of Status of 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. Ancient Mariner, Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 81-3263749 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1402 Walkup Ave. 7. Monroe, NC 28110 (Principal office address) _____ PO Box 1277 Monroe, NC 28111 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) REGISTERED AGENTS INC. Name: 3030 N. Rocky Point Drive, STE 150A Office Address: TAMPA (City)

9. 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.

Bill Havre/Secretary/Registered Agents Inc.

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	· 63 3
Address:	
Vice Chairman:	
Address:	,
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	- -
Bill Petroff	
President:	<u> </u>
Address: Indian Trail, NC 28079	
Jessica Cann	<u>. </u>
Vice President: 3606 Braefield Dr	
Address:	
Indian Trail, NC 28079	<u>.</u> .
Secretary:	
Address:	
Treasurer:	
Address:	11
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or of	
12. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 above) affirms that the factor are true and that he or she is aware that false information submitted in a document to the Department of a third degree felony as provided for in s.817.155, F.S. Jessica Cann	cts stated herein State constitutes
13(Typed or printed name and capacity of person signing application)	



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

ANCIENT MARINER, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 14th day of July, 2016, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

WITNESS WHEREOF. I have hereunto set

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 16th day of February, 2017.

Elaine J. Marshall

Secretary of State