

F00000000/693

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Professional Marine Consulting, Incorporated
(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", 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:

William C. King
(Name of Person) 000003183750--3
-03/24/00--01106--001
Professional Marine Consulting, Incorporated *****78.75 *****78.75
(Firm/Company)
8211 Beach Blvd.
(Address)
Jacksonville, Florida 32216
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Deborah Howard at (904) 724-8911
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien 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

FILED
00 MAR 24 AM 10:42
TALLAHASSEE FLORIDA
SECRETARY OF STATE
W² 3/28

**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. Professional Marine Consulting, Incorporated
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. West Virginia
(State or country under the law of which it is incorporated)
3. _____
(FEI number, if applicable)
4. March 14, 2000
(Date of incorporation)
5. _____
(Duration: Year corp. will cease to exist or "perpetual")
6. March 30, 2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 8211 Beach Boulevard
Jacksonville, Florida 32216
(Current mailing address)
8. commercial diving/consulting
(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 or Mail Drop Box NOT acceptable)

Name: William C. King

Office Address: 8211 Beach Blvd.
Jacksonville, Florida, 32216
(Zip code)

FILED
00 MAR 24 AM 10:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

(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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: William C. King

Address: 8211 Beach Boulevard

Jacksonville, Florida 32216

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

FILED
00 MAR 24 AM 10:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

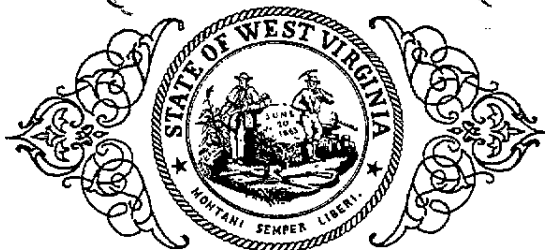
13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William C. King - President

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

State of West Virginia



Certificate

*I, Ken Hechler, Secretary of State of the
State of West Virginia, hereby certify that*

the following and hereto attached is a true and exact copy of the articles of incorporation of;

PROFESSIONAL MARINE CONSULTING, INCORPORATED

filed in this office on the 14th day of March, 2000; there being no amendments or additions
thereto; as it appears from the records of my said office.

FILED
00 MAR 24 AM 10:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA



*Given under my hand and the
Great Seal of the State of
West Virginia on
March 14, 2000*

Ken Hechler

Secretary of State