

F00000001952

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: LT DIVING SERVICES, INC.
(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:

WARREN T. SEELEY
(Name of Person)
LT DIVING SERVICES, INC.
(Firm/Company)
101425 OVERSEAS HWY, PMB 918
(Address)
KEY LARGO FL 33037
(City/State/Zip)

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

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-03/31/00--01039--009
*****70.00 *****70.00

WARREN T. SEELEY at (305) 942 5012
(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 31 PM 1:32
TALLAHASSEE FLORIDA
SECRETARY OF STATE
WR4/7

**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. L T DIVING SERVICES, INC.
(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. NEVADA 3. 88-0453290
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. FEB 28, 2000 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. FEB 28, 2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 101425 OVERSEAS HWY, PMB 918
KEY LARGO FL 33037
(Current mailing address)

8. THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN ANY LAWFUL ACTIVITY
(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: WARREN T. SEELEY

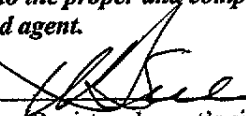
Office Address: 1100 GRAND ST.

KEY/LARGO, Florida, 33037
(Zip code)

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DEPARTMENT 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: WARREN T. SEELEY

Address: 1100 GRAND ST.
KEY LARGO FL 33037

Vice Chairman: LORILYNN BOUFFARD

Address: 1100 GRAND ST.
KEY LARGO FL 33037

Director: _____

Address: _____

Director: _____

Address: _____

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

President: WARREN T. SEELEY

Address: 1100 GRAND ST.
KEY LARGO FL 33037

Vice President: _____

Address: _____

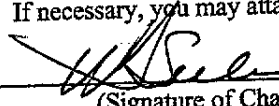
Secretary: LORILYNN BOUFFARD

Address: 1100 GRAND ST.
KEY LARGO FL 33037

Treasurer: _____

Address: _____

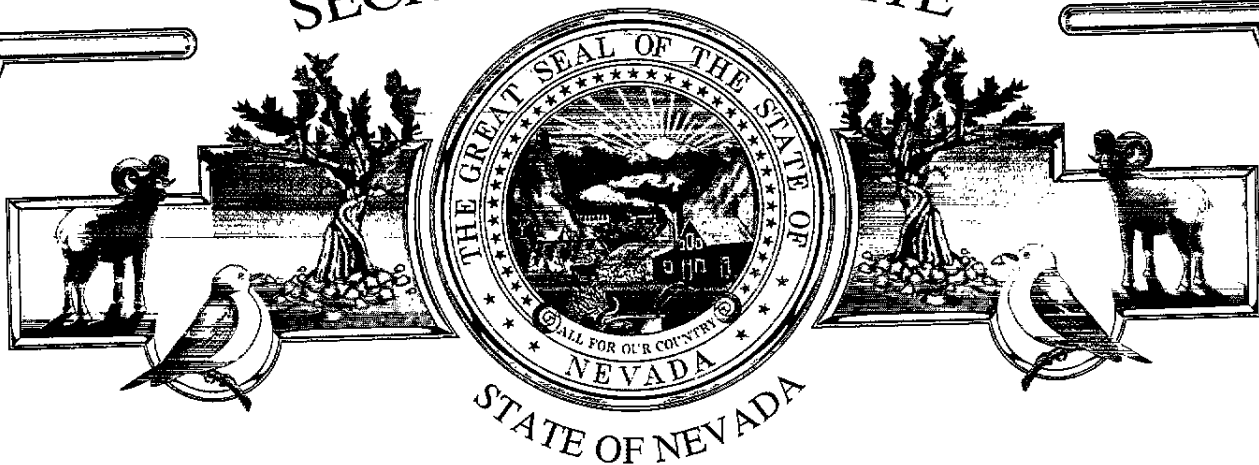
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. WARREN T. SEELEY, PRESIDENT
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

SECRETARY OF STATE



CORPORATE CHARTER

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **LT DIVING SERVICES, INC.** did on **FEBRUARY 28, 2000**, file in this office the original Articles of Incorporation; that said Articles are now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said Articles contain all the provisions required by the law of said State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Las Vegas, Nevada, on **FEBRUARY 28, 2000**.

FILED
00 MAR 31 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dean Heller

Secretary of State

By

Sharon Davis
Certification Clerk

