# TRANSMITTAL LETTER

To: Registration Section Division of Corporations		
SUBJECT: RYAN, RYAND Co., (Name of corporation	) NC . REPLEST n - must include suffix)	THE COUNSELORS
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to retransact business in Florida.  Please return all correspondence concerning this matter.	egister the above referenced :  OOOO  -05	foreign corporation to 032601106 5/19/0001114003
JAMES P. RYAN (Name of	Person)	
RYAN, RYAN & C (Firm/Co	npany)	ALZSTATE LOUNS-100
3304 SAWGLAC	ress)	<u>- 186 CE</u>
PONTE VEDRA (City/Sta	BEACH FL	_0e0a32082
Should you need to call someone concerning this matte	r, please call:	
	280 4130 Code & Daytime Telephone	Number
		FILI MAY 19 RETARY Allasse
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	97 5/24
Enclosed is a check for the following amount:		5/24
\$70.00 Filing Fee	\$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.	RYAN, RYAN & CO., INC. REACESTATE COUNSELORS
	(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.)
	natural person of partnership it not so contained in the name at present.)
2.	DECEWAR & 3. 59-3521045
۷.	(State or country under the law of which it is incorporated)  3. 59-3521045  (FEI number, if applicable)
4	
4.	(Date of incorporation)  5. PERETUA-C (Duration: Year corp. will cease to exist or "perpetual")
	UPON QUALIFICATION
	(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
_	a 3304 SAWGRASS VILLAGE CIDCLE PONTE VEDRA BEACH FL
7.	(Principal office address)
	b. 3304 SAW GRASS VILLAGE CIRCLE PONTY VEDRABETALL FO
	(Current mailing address) 320 82
8.	ANY LEGAT PORPOSE - ES 8
	(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: JAMES P. RYAN
Of	ffice Address: 3304 SAWCRASS VILLAGE CIR
	PONTS VEDRA BEACH, Florida 32082
	(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.

(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.

A. DIRECTORS
Chairman: JAMES P. RYAN
Address: 1183 SACT WARSH CIRCLE
PONTS VEDRA BEACH FC
Vice Chairman:
Address:
Director: NoN
Address:
Director: NON
Address:
B. OFFICERS
President: JAMES P. RYAN ES 8
Address: 1183 SALT MIRSH CIRCLE SI & TI
PONTY VEDRABEACH AC 32082 5 F
Vice President: JOAN & RYAN
Address: 1183 SALTMARSH CIRCLE SH &
POWTEVEDRA BEACH FL 3208Z
Secretary: DOAWS RYAN
Address: 1183 SACT MACSACIA
PONTE VEORA BEACH FL 32082
Treasurer: JOA-e) E RMAN
Address: U83 SACT MARSW CIR
PONTS VENDA BEACH FC 32082
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)
JAMES PRUANT POSTO

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

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

# State of Delaware

# Office of the Secretary of State PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RYAN, RYAN & CO., INC. REAL ESTATE COUNSELORS" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF MAY, A.D. 2000.

00 MAY 19 PH 2: 40
SECRETARY OF STATE



Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

0430944

DATE:

05-10-00

2907620 8300

001227923