

F040000006140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

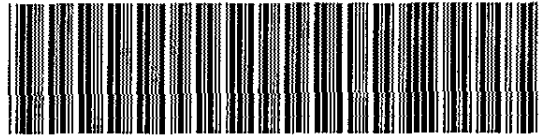
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400024794064

01/08/04--01031--003 \*\*87.50

RECEIVED

01 JAN -8 PM 12:00

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

04

JAN -8

PM 2:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BK

**CT CORPORATION**

January 8, 2004

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

FILED  
04 JAN -8 PM 2:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Order #: 6009488 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Sunsail, Inc. (MD)  
Qualification  
Florida

Please return a good standing certificate and a certified copy along with regular evidence.

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton  
Sr. Fulfillment Specialist  
Jeff\_Netherton@cch-lis.com

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO THE SECRETARY OF STATE FOR REGISTRATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

04 JUN -8 11 2:38  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. **Sunsail, Inc.**

(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)

2. **Maryland**

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

3. **pending**

(FEI number, if applicable)

4. **May 9, 2003**

(Date of incorporation)

5. **perpetual**

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

6. **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.)

7. **980 Awald Road, Suite 302, Annapolis, Maryland 21403**

(Principal office address)

**980 Awald Road, Suite 302, Annapolis, Maryland 21403**

(Current mailing address)

8. **engage in charter boat service and related activities**

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.*

Carrie Agan

(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: **Chris Gordon**

Address: **980 Awald Road, Suite 302**

**Annapolis, Maryland 21403**

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

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

Director: **Peter Cochran**

Address: **980 Awald Road, Suite 302**

Director: **Peter Cook**

Address: **980 Awald Road, Suite 302**

**Annapolis, Maryland 21403**

## B. OFFICERS

President: **Chris Gordon**

Address: **980 Awald Road, Suite 302**

**Annapolis, Maryland 21403**

Vice President: **Peter Cochran**

Address: **980 Awald Road, Suite 302**

**Annapolis, Maryland 21403**

Secretary: **Peter Cook**

Address: **980 Awald Road, Suite 302, Annapolis, Maryland 21403**

Treasurer: **Peter Cook**

Address: **980 Awald Road, Suite 302, Annapolis, Maryland 21403**

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

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. **Peter Cook, Secretary and Treasurer**

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

**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. Sunsail, Inc.**

(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)

**2. Maryland**

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

**3. pending**

(FEI number, if applicable)

**4. May 9, 2003**

(Date of incorporation)

**5. perpetual**

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

**6. 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.)

**7. 980 Awald Road, Suite 302, Annapolis, Maryland 21403**

(Principal office address)

**980 Awald Road, Suite 302, Annapolis, Maryland 21403**

(Current mailing address)

**8. engage in charter boat service and related activities**

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(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.*

Carrie Rogers

(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: Chris Gordon

Address: 980 Awald Road, Suite 302

Annapolis, Maryland 21403

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

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

Director: Peter Cochran

Address: 980 Awald Road, Suite 302

Director: Peter Cook

Address: 980 Awald Road, Suite 302

Annapolis, Maryland 21403

**B. OFFICERS**

President: Chris Gordon

Address: 980 Awald Road, Suite 302

Annapolis, Maryland 21403

Vice President: Peter Cochran

Address: 980 Awald Road, Suite 302

Annapolis, Maryland 21403

Secretary: Peter Cook

Address: 980 Awald Road, Suite 302, Annapolis, Maryland 21403

Treasurer: Peter Cook

Address: 980 Awald Road, Suite 302, Annapolis, Maryland 21403

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

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Peter Cook, Secretary and Treasurer

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

**STATE OF MARYLAND**  
**Department of Assessments and Taxation**

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT SUNSAIL, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JANUARY 07, 2004.

*Paul B. Anderson*

Paul B. Anderson  
Charter Division

