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04 MAR -5 AM 11:48
DIVISION OF CORPORATION
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TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

St Matthew's University

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- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

Signature _____

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 8, 2004

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: ST. MATTHEW'S UNIVERSITY (CAYMAN) LTD.
Ref. Number: W04000009220

FILED
04 MAR -5 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ST. MATTHEW'S UNIVERSITY (CAYMAN) LTD. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$87.50 payment.

You have used a FOR PROFIT CORPORATION FORM. Is this a "FOR PROFIT" corporation. Please note that non-profit corporations use another form.

ALSO, please state a PURPOSE for the corporation in Item 8.

AND ALSO, please note that since Florida doesn't accept LTD. as a corporate suffix, you will need to add "INC." after the "LTD." in the name on line 1.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 604A00015213

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

RECEIVED
04 MAR 11 AM 9:59
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

04 MAR -5 PM 2:04
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: ST. Matthew's University (Cayman) Ltd., Corp.
(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:

Michael A. Harris
(Name of Person)

ST. Matthew's University
(Firm/Company)

1005 W. College Blvd Suite A
(Address)

Aliville FL 32578
(City/State and Zip code)

For further information concerning this matter, please call:

Darlene Burke at (850) 678-1225
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration 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

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

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TALLAHASSEE, FLORIDA

1. ST. Matthew's University (Cayman) Ltd. Corp.
(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. Cayman Islands 3. 98-0567165
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/1/02 5. perpetual
(Date of incorporation) (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. P.O. Box 32330 SMS Safe Haven, Leeward Three, Grand Cayman
(Principal office address)
P.O. Box 32330 SMS Safe Haven, Leeward Three, Grand Cayman
(Current mailing address)

8. To carry on any trade or business or lawful activity and enter into any transactions whatever which can in the opinion of the corporation be carried out in the state of Florida
(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: Darlene Burke

Office Address: 239 Wava Ave

Aliville, Florida 32578
(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.

Darlene Burke
(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.

*of the Board of Directors be advantageously or conveniently carried on by the Company which purpose the Company will have such powers as are not prohibited by law.

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

A. DIRECTORS

Chairman: Michael A Harris

Address: 1005 W College Blvd Suite A
Niceville FL 32578

Vice Chairman: _____

Address: _____

Director: Galen P. Swartzen druber

Address: 1921 Waldemere st. Suite 802
Sarasota FL 34239

Director: International Corporation Services Ltd

Address: P.O. Box 472 George Town
Grand Cayman, Cayman Islands

B. OFFICERS

President: Michael A Harris

Address: 1005 W College Blvd Suite A
Niceville FL 32578

Vice President: Jerry Tharnton

Address: 1750 W Broadway Street Suite 222
Oviedo FL 32765


Secretary: Galen P Swartzen druber

Address: 1921 Waldemere st. Suite 802 Sarasota FL 34239

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. Michael A Harris, Chairman

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

IC-115571

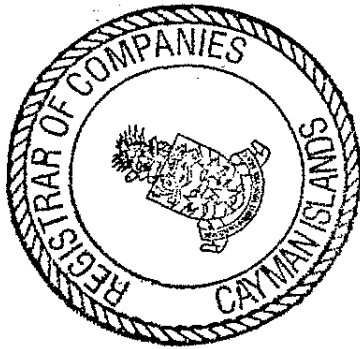
Certificate Of Good Standing

TO WHOM IT MAY CONCERN

I DO HEREBY CERTIFY that

St. Matthew's University (Cayman) Ltd.

a company duly organized and existing under and by virtue of the Laws of The Cayman Islands is at the date of this certificate in Good Standing with the office, and duly authorized to exercise therein all the powers vested in the company.



Given under my hand and Seal at George Town in the Island of Grand Cayman this 1st day of March Two Thousand Four

An Authorized Officer,
Registry of Companies,
Cayman Islands, B.W.I.