F08000002170

/Danie	ahada Alama)			
(Reques	stor's Name)			
(Addres	s)			
(Address)				
(City/Sta	ate/Zip/Phone #)			
(Oity/Ote	nerziph hone #j			
PICK-UP	WAIT MAIL			
(Busines	ss Entity Name)			
. (2.101/12)				
(Docum	ent Number)			
Certified Copies	Certificates of Status			
Consist Instructions to Filing	045			
Special Instructions to Filing Officer:				

Office Use Only



100129015901

05/13/08--01018--012 **87.50

mP3/13

OB MAY 13 PM 3: 23
SECRETARY OF STATE
AND ANASSEE, FLORID

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Port Mayaca Developme (Name of corpo	ent Company, Inc. oration - must include suffix)	
Dear Sir or Madam:		
	n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to	
Please return all correspondence concerning this n	natter to the following:	
William W. Atterbury,	III	
	me of Person)	
Alley Mance Pogoro	& Lindsay, P.A.	
	n/Company)	
`	• •	
340 Royal Poinciana W	Address)	
,	Audivaa	
Palm Beach, Florida 3		
(City/S	State and Zip code)	
For further information concerning this matter, ple	ease call:	
William W. Atterbury, III at (5	61) 659–1770	
	Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing 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 & S87.50 Filing Fee, Certified Copy 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.

	ayaca Development Comp			
"Inc.," "Co.," "Co	orporation; must include "INCOK orp," "Inc," "Co," or "Corp.")	PORATED,"	'COMPANY," "CORPORATION	l,''
	(,,			
(If name unavaila	ible in Florida, enter alternate corp	porate name ad	opted for the purpose of transacting	g business in Florida)
· ·			20 0007755	
2. <u>Missour</u> (State or country u	r i under the law of which it is incorp		20-8807755 (FEI number, if appli	icable)
			•	
4. <u>April</u>	of incorporation)	5. <u>_</u>	Perpetual Duration: Year corp. will cease to	
(Date	or incorporation)	()	Duration: Tear corp. will cease to	exist or "perpetual")
5. Januar				
			lorida, if prior to registration) , F.S., to determine penalty liabilit	v)
				,,
7. 2730 S	Lindbergh, St. Louis	s, Missour al office addres		
	(1 incipa	ar office address	5)	
		1 1:	<u> </u>	
	(Current)	mailing addres	s)	
0 A T				
(Purpose(s)	wful Business of corporation authorized in hom	e state or coun	try to be carried out in state of Flor	ida) 1 . O
				PER BE
. Name and street	address of Florida registered a	agent: (P.O. E	Box NOT acceptable)	27
Name:	William W. Atterbur	ry. III		रिक्री क
				SEE P
Office Address:	340 Royal Poinciana	i Way, Sui	<u>t</u> e 321	ا بي آير
	Palm_Beach		, Florida <u>_33480</u>	9E 73
	(City)		(Zip code)	DE S
O Poristand	ont's assentance		•	• •
				agranged on at the place
	d as registered agent and to a	ccent service i	OF Drocess for the above stated (cornoranon al ine mace
Having been name lesignated in this a	d as registered agent and to ac application, I hereby accept th	e appointmen	t as registered agent and agree	to act in this capacity. I
designated in this a further agree to co	application, I hereby accept th mply with the provisions of all	e appointmen Statutes relat	t as registered agent and agree tive to the proper and complete	to act in this capacity. I
Having been name designated in this d further agree to co	application, I hereby accept th	e appointmen Statutes relat	t as registered agent and agree tive to the proper and complete	to act in this capacity. I
Having been name designated in this d further agree to co	application, I hereby accept th mply with the provisions of all	e appointmen Statutes relat	t as registered agent and agree tive to the proper and complete	to act in this capacity. I
Having been name designated in this d further agree to co	application, I hereby accept th mply with the provisions of all	e appointmen Statutes relat	t as registered agent and agree tive to the proper and complete	to act in this capacity. I

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.

2. Names and bu	siness address	es of officers and/or directors:	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
A. DIRECTORS		•	
Chairman:			
Address:			{ · · · · · · · · · · · · · · · · · · ·
Vice Chairman:	ų.	;	
Address:	•	-	
	:		
Director: Stepl	en Avonst	Orthwein	; ', ' ! ;
•	· .	gh, St. Louis, Missouri 63131	
	2. Trudhe	gn, st. Louis, missouri usisi	
	<u> </u>		
	1 :	<u>'</u>	
. OFFICERS		•	
resident: Stepl	nen August	Orthwein	
ddress:2730	S. Lindbe	rgh, St. Louis, Missouri 63131	
		, -	
ice President;	: :	,	! :
ddress:			
	*,		
ecretary: <u>Step</u>			
ddress: <u>2730</u>	S. Lindbe	rgh. St. Louis, Missouri 63131	
reasurer:	·		
ddress:	·		
		ž	
OTE: If necessar	y you may at	tach an addendum to the application listing ad	ditional officers and/or directors.
3			
	` -	of Director or Officer listed in number 12 of the	he application)
Step		Orthwein , President r printed name and capacity of person signing	

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

PORT MAYACA DEVELOPMENT COMPANY, INC. 00807963

was created under the laws of this State on the 10th day of April, 2007, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 4th day of April, 2008

Alm Complex Secretary of State

Certification Number: 10616553-1 Reference: si