

| (Re | questor's Name) | | | |
|-------------------------|-------------------|-----------|--|--|
| (Ad | ldress) | | | |
| (Ad | dress) | | | |
| (Cit | y/State/Zip/Phone | · #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| . (Bu | siness Entity Nam | ne) | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies | _ · Certificates | of Status | | |
| Special Instructions to | Filing Officer: | | | |
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Office Use Only



08/11/09--01027--003 ***

COVER LETTER

| TO: New Filing Section Division of Corporations | |
|---|--|
| SUBJECT: South Swell Management, I | nc. |
| | on - must include suffix |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida. | |
| Please return all correspondence concerning this matt | er to the following: |
| Robert | Harte |
| Name o | of Person |
| South Swell Ma | nagement, Inc. |
| Firm/Co | ompany |
| 11008 US | 3 41 North |
| Add | Iress |
| Palmetto, | FL 34221 |
| City/State | and Zip code |
| tcsgc1@v | erizon.net |
| E-mail address: (to be use | d for future annual report notification) |
| For further information concerning this matter, please | e call: |
| Robert Harte at (941 | ₎ 721-7711 |
| | a 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 \$\int \\$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status of 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. | Management, Incorporated orporation; must include "INCORPORAT | ED | " "COMPANY" "COPPOPATION" | _ |
|-------------------|--|------|---|-------------|
| | orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.") | CD. | , COMPANT, CORPORATION, | |
| | | | | |
| (If name unavails | able in Florida, enter alternate corporate na | ame | adopted for the purpose of transacting business in Florida | <u>-</u> |
| 2. Delaware | | 3. | 27-0576514 | _ |
| | under the law of which it is incorporated) | | (FEI number, if applicable) | _ |
| 4. 08/11/2008 | | 5. | perpetual | |
| | of incorporation) | | (Duration: Year corp. will cease to exist or "perpetual") | _ |
| 6 | | | | _ |
| | | | n Florida, if prior to registration) 502, F.S., to determine penalty liability) | |
| 44000 110 44 | · · | ,,., | 502, 1.3., to determine penalty hability) | |
| 7. 11008 US 41 | North, Palmetto, FL 34221 (Principal office | add | lress) | |
| 11000 HS 41 | North, Palmetto, FL 34221 | | | |
| 11000 03 41 | (Current mailing | ado | lress) | _ + |
| | ` | | , | |
| 8. | | | ECR 194 | - Charles |
| (Purpose(s |) of corporation authorized in home state (| or c | ountry to be carried out in state of Florida) AFT ASS O Rev NOT country to | TI A |
| 9. Name and stree | et address of Florida registered agent: (| (P.C | J. Box NOT acceptable) | |
| Name: | Daniel Harte | | FEOT | |
| Office Address: | 11008 US 41 North | | PH 1: 20 OF STATE E.F.LORIDA | |
| | Palmetto | | , Florida 34221 | |
| | (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.

(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. Name | es and business addresses of officers and/or directors: |
|-------------|---|
| A. DIRE | CTORS |
| Chairman: | |
| Address: | |
| _ | |
| Vice Chair | man: |
| Address: | |
| _ | |
| Director: | Robert Harte |
| Address: | 11008 US 41 North |
| _ | Palmetto, FL 34221 |
| Director: | Daniel Harte |
| Address: | 11008 US 41 North |
| _ | Palmetto, FL 34221 |
| B. OFFI | CERS |
| President: | Robert Harte |
| | 11008 US 41 North |
| <u>!</u> | Palmetto, FL 34221 |
| Vice Presid | dent: |
| Address: _ | |
| _ | |
| Secretary: | |
| Address: _ | |
| Treasurer: | |
| Address: _ | |
| 13. | f necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) |
| 14 Dani | el Harte, Director |

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SOUTH SWELL MANAGEMENT, INC." 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 THIRD DAY OF AUGUST,

A.D. 2009.

4586394 8300

090733947

.

AUTHENTY CATION: 7452614

DATE: 08-03-09

You may verify this certificate online at corp.delaware.gov/authver.shtml