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7059 NOV 24 A H: 51 TO: **New Filing Section** Division of Corporations SECRETARY OF STATE ULLAHASSEE, FLORIDA SUBJECT: AUS Management, Inc. 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," or "Certificate of Good Standing" 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: Ana C.Harris Name of Person Cela Advisors, LLC Firm/Company 9100 S. Dadeland Blvd., Suite 1500 Address Miami, FI 33156 City/State and Zip code aharris@celaadvisors.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ana C. Harris Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: **New Filing Section New Filing Section Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee,

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Certificate of Status

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. AUS Manag	ement, Inc.	
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"
,,	o.p.,, o., o. op.,	
(If name unavail	able in Florida, enter alternate cornorate name a	dopted for the purpose of transacting business in Florida)
2. Nevada	under the law of which it is incorporated)	(FEI number, if applicable)
` •	•	•
4. <u>12/9/2004</u>		Perpetual (1)
`	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. <u>N/A</u>	(Date first transacted business in	Florida if prior to registration)
	(SEE SECTIONS 607.1501 & 607.15	
7 24 Dockside	Lane, PMB 77, Key Largo, Florida 3	3037
, <u> : : : : : : : </u>	(Principal office addr	
24 Dockside	Lane, PMB 77, Key Largo, Florida 3	3037
	(Current mailing addr	
		ESS)
8. All business		
(Purpose(s	s) of corporation authorized in home state or con	intry to be carried out in state of Florida)
9. Name and stree	et address of Florida registered agent: (P.O	Box NOT acceptable)
Name:	Les Adler, CPA	<u> </u>
Office Address:	9100 S. Dadeland Blvd., Suite 16	00_
	Miami	, Florida 33156
	(City)	(Zip code)
10. Registered a	gent's acceptance:	
	_	e of process for the above stated corporation at the place
		ent as registered agent and agree to act in this capacity. I
	omply with the provisions of all statutes re with and accept the obligations of my pos	lative to the proper and complete performance of my duties ition as registered agent.
	Levlie Adh	
_	(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	FILED	
Chairman: Currie Mebane		
Address: 1816 Margaret Ave	2卿 NOV 24 A II: 51	
Annapolis, MD 21401	ECRETARY OF STATE	
Vice Chairman:		
Address:		
Director: Adelaide Schultze		
Address: 24 Dockside Lane, PMB 77		
Key Largo, Florida 33037		
Director:		
Address:		
B. OFFICERS		
President: Currie Mebane		
Address: 1816 Margaret Ave		
Annapolis, MD 21401		
Vice President: Adelaide Schultze		
Address: 24 Dockside Lane, PMB 77		
Key Largo, Florida 33037		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional of the application of Director or Officer listed in number 12 of the application		
(Signature of Director or Officer listed in number 12 of the applic	eation)	
14. Adelaide Schultze, Vice President		
(Typed or printed name and capacity of person signing applicat	ion)	

SECRETARY OF STATE





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SECRETARY OF STATE

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, AUS MANAGEMENT, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 9, 2004, and is in good standing in this state.

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hand and affixed the Great Seal of State, at my office on November 5, 2009.

IN WITNESS WHEREOF, I have hereunto set my

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20091105-1481
You may verify this electronic certificate
online at http://www.nvsos.gov/