

**Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.  
Account Number : I20000000257  
Phone : (850) 224-8870  
Fax Number : (850) 222-1222

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

**FOREIGN PROFIT/NONPROFIT CORPORATION  
MacDonnell Security Risk Management Limited, Incorpo**

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**SECRETARY OF STATE  
TALLAHASSEE, 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. MacDonnell Security Risk Management Limited, Incorporated**

(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. Canada**

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

**3. N/A**

(FEI number, if applicable)

**4. February 23, 2009**

(Date of incorporation)

**5. Perpetual**

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

**6. Not prior to registration**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 1506 Barrington Street, Halifax, Nova Scotia CANADA B3J 3K5**

(Principal office address)

**1506 Barrington Street, Halifax, Nova Scotia CANADA B3J 3K5**

(Current mailing address)

**8. Any and all lawful business**

(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 NOT acceptable)**

Name: Capital Connection, Inc.

Office Address: 417 E. Virginia Street - Suite 1

Tallahassee

(City)

Florida 32301

(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)

Seth Neely for Capital Connection, Inc.

**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.**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**12. Names and business addresses of officers and/or directors:****A. DIRECTORS**

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

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

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

Address: \_\_\_\_\_  
\_\_\_\_\_Director: Ralston MacDonnellAddress: 1505 Barrington StreetHalifax, Nova Scotia CANADA B3J 3K5

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_**B. OFFICERS**President: Ralston MacDonnellAddress: 1505 Barrington StreetHalifax, Nova Scotia CANADA B3J 3K5

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_**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. Ralston MacDonnell, President

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**Nova Scotia**

**CERTIFICATE OF STATUS**

I hereby certify that according to the records of this office

**MACDONNELL SECURITY RISK MANAGEMENT LIMITED**

was registered under the Corporations Registration Act of Nova Scotia on  
December 30, 2009 and the certificate is still in force.

A handwritten signature in black ink, appearing to read "J. S. Cui", written over a horizontal line.

Registrar of Joint Stock Companies

June 24, 2010

Date of Issue