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(Re	equestor's Name)			
(Address)				
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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COVER LETTER

	Filing Secti			
SUBJECT:	Matthe	ws Marine, Inc.		
			ntion - must include suffix	
Dear Sir or M	fadam:			
"Certificate of	f Existence		for Authorization to Transact Standing" and check are submisiness in Florida.	
Please return	all correspo	ndence concerning this m	atter to the following:	
Thomas	B. Matth	news		
		Name	e of Person .	
Matthew	/s Marin	e, Inc.		
		Firm/	Company	
P.O. Bo	x 178			
		A	Address	
Pass Chi	ristian, N	1S 39571		
		•	ate and Zip code	
mail@ma	tthewsbr	othersinc.net	sed for future annual report n	
				outication)
For further in	iformation c	oncerning this matter, ple	ase call:	
Thomas I	R Matth	ews . 22	8 ₎ 452-0804	
	ne of Person	at (rea Code & Daytime Telepho	one Number
			,	
New Divis Cliffe 2661 Talla	Filing Secti sion of Corp on Building Executive C chassee, FL	orations Center Circle	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl	ction rporations
	Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fec,
		Continent of Status	Certified Copy	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.

t. Matthews	Marine, Inc.	
	of corporation; must include "INCORPORATED. "Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
Matthews	Marine, Inc. of Mississippi	
(If name unar	vailable in Plorida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
2. Mississipp	ii	64-0905775
(State or coun	try under the law of which it is incorporated)	(FEI number, if applicable)
4. February	19, 1999 5.	"perpetual"
(1	Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. not applic	cable	
	· ·	in Florida, if prior to registration) 502, F.S., to determine penalty liability)
7. 455 Fleit	as Avenue, Pass Christian, MS	39571
	(Principal office add	
P.O. Box	x 178, Pass Christian, MS 395	571
	(Current mailing add	dress)
8. Dredgin	g, Marine Construction	10000000000000000000000000000000000000
(Purpo	se(s) of corporation authorized in home state or c	country to be carried out in state of Florida) 55 55 771
9. Name and s	street address of Florida registered agent: (P.	O. Box NOT acceptable)
Name	CT CORPORATION SYSTEM	
Office Address	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION	, Florida _33324
	(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.

James M. Halpin

Assistant Secretary

(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	
Chairman:	
Address;	
Vice Chairman:	
Address:	
Address: P.O. Box 178, Pass Christian, MS 395	71
Director: Thomas B. Matthews	
Address: P.O. Box 178, Pass Christian, MS 39	
B. OFFICERS	
President: Robert Shaw Matthews, Jr.	
Address: P.O. Box 178, Pass Christian, MS 39571	三 三 三
	Σ S S S S
Vice President: Ann Barker Matthews	
Address: P.O. Box 178, Pass Christian, MS 39571	<u>.</u> 5
Secretary: Thomas B. Matthews	
Address: P.O. Box 178, Pass Christian, MS 39571	
Treasurer: Thomas B. Matthews	
Address: P.O. Box 178, Pass Christian, MS 39571	
NOTE: If necessary, you may attach ay addendum to the applicati	on listing additional officers and/or directors.
13. Im Carpe Walte	
Signature of Director of The officer or director signing this document (and who is listed in are true and that he or she is aware that false information submitted third draws follows as provided for in 2017 155.	number 12 above) affirms that the facts stated herein
third degree felony as provided for in s.817.155, F.S. 14. ANN BARKER MATHEWS, Vice	President

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

State of Mississippi

Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on February 19, 1999, the State of Mississippi issued a Charter/Certificate of Authority to:

MATTHEWS MARINE, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

SA SAN DE MISSES

Given under my hand and seal of office May 11, 2011

C. Delbert Hosemann, Jr. Secretary of State

Dellet Hosemann, dr.

Certification Number: 12484586-1 Page 1 of 1 Reference: Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp