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PICK-UP WAIT MAIL
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(Document Number)
Certified Copies Certificates of Status
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### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Port Sanibel Marine 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:
Wilma Hartmann
Name of Person
Port Sanibel Marine, Inc.
P. O. Box 351
Somerset Ky 42502
City/State and Zip code  Randy hartmann amail. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Randy Hartmann (606) 677-0939  Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Final and the factor of the size of t
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$ Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee.

## 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. (Enter name of corporation; must include "INCORPORATED." "COMPANY." "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Port Saribel Marine Incorporated
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

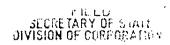
3. 45-3657675

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) inggold Road Somerset Ky 42503 Current mailing address)

Somerset Ky 42502 To Own, operate, and deal in and with marine (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: Office Address: 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.

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	SECRETARY OF STAIL
Chairman: Wilma J. Hartmann	DIVISION OF CORPORATION
Address: 1864 Ringgolo Road	2011 NOV -9 PM 1:12
5 / / / / / / / / / / / / / / / / / /	
Vice Chairman:	
Address:	
Address	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Wilma J. Hartman	
Somerset Ky 42503	
Vice President:	
Address:	
2.1.1	
Secretary: Wilma J. Hartman	40542
Address: 1864 Ringgold Rd. Domerset K.	<del>- 42503</del>
Treasurer:	······································
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or directors.
13. Wilne gea Hartmann Signature of Director or Officer	- N-
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) a	ffirms that the facts stated herein
are true and that he or she is aware that false information submitted in a document to the	
third degree felony as provided for in s.817.155, F.S.  14. Wilne & Kartman	
(Typed of printed name and capacity of person signing applic	ation)



# Commonwealth of Kentucky Elaine N. Walker, Secretary of State

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Elaine N. Walker Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

#### Certificate of Existence

Authentication number: 119407

Visit <a href="https://app.sos.ky.gov/ftshow/certvalidate.aspx">https://app.sos.ky.gov/ftshow/certvalidate.aspx</a> to authenticate this certificate.

I, Elaine N. Walker, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

### PORT SANIBEL MARINE, INC.

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is October 28, 2011 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 4<sup>th</sup> day of November, 2011, in the 220<sup>th</sup> year of the Commonwealth.



Elaine N. Walker Secretary of State Commonwealth of Kentucky

W. Waller

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