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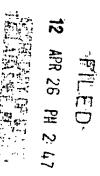
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#### **COVER LETTER**

TO: New Filing Section					
Division of Corporations					
SUBJECT: GARDINER & THEOBALD INC					
Name of corporation - must include suffix					
Dear Sir or Madam:					
The enclosed "Application by Foreign Corporation for Authorization to Transact "Certificate of Existence," or "Certificate of Good Standing" and check are submabove referenced foreign corporation to transact business in Florida.					
Please return all correspondence concerning this matter to the following:					
ANDREW MANN					
Name of Person					
GARDINER & THEOBALD INC					
Firm/Company					
317 MADISON AVENUE					
Address	_				
NEW YORK, NEW YORK 10017					
City/State and Zip code					
A.MANN@GARDINERUSA.COM					
E-mail address: (to be used for future annual report no	tification)				
For further information concerning this matter, please call:					
ALICIA WLODINGUER at ( 212 ) 661-6624					
Name of Person Area Code & Daytime Telephor	ne Number				
STREET/COURIER ADDRESS:  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL  Tallahassee, FL  Tallahassee, FL	tion porations				
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$78.75 Filing Fee \$ Certificate of Status \$78.75 Filing Fee \$ Certified Copy	\$87.50 Filing Fee, Certificate of Status & 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.

I. GARINI	DER & THEOBALD INC				
(Enter nar	ne of corporation; must include "INCORPORATE. o.," "Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"			_
(If name u	navailable in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting bus	iness in Fl	orida)	-
2. DELAW	ARE .	<sub>3.</sub> 58-2055197			
	ountry under the law of which it is incorporated)	(FEI number, if applicable)		-	
4. 06/01/1	993	5. PERPETUAL			
··	(Date of incorporation)	(Duration: Year corp. will cease to exist	on "perpet	<b>(10</b> )	•
6. MAY 1	2012	,		<b>*</b>	a.,
	(Date first transacted business	s in Florida, if prior to registration) .1502, F.S., to determine penalty liability)	変は	R 26	The second
7.3201 C	OLLINS AVE, MIAMI BEACH, F			<u> </u>	_ <del>Ö</del> _
(Principal office address)			*		
317 M	ADISON AVE, NEW YORK, NE			F	_
	(Current mailing a	ddress)			
. TO DR	OVIDE PROJECT, COST, AND COI	NSTRUCTION MANAGEMENT	SERVIO	CES	
O	pose(s) of corporation authorized in home state or				-
9. Name an	d street address of Florida registered agent: (F	P.O. Box NOT acceptable)			
Na	me: ANDREW MANN				
Office Add	ess: 3201 COLLINS AVE				
	MIAMI BEACH	Florida 33140			
	(City)	, Florida 33140 (Zip code)			
Having bee designated further agr	red agent's acceptance: In named as registered agent and to accept sen In this application, I hereby accept the appoin The to comply with the provisions of all statutes The miliar with and accept the obligations of my	ntment as registered agent and agree to a s relative to the proper and complete per	act in this	capa	city. I

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:	ge <del>de la company</del>
A. DIRECTORS	FILED
Chairman:	
Address:	· <del></del>
	THE SEE FROM
Vice Chairman:	
Address:	
Director: ANDREW MANN	
Address: 16 MEEKER ROAD	
WESTPORT OT 06880	
Director:	
Address:	
B. OFFICERS  President: ANDREW MANN	
16 MEEKER BOAR	
WESTPORT CT 06880	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary you may attach an addendum to the application listing a	
13. Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 are true and that he or she is aware that false information submitted in a document degree felony as provided for in s.817.155, F.S.  14 ANDREW MANN	
I/I COUNCION NO INICALNIA	

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GARDINER & THEOBALD, 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 TWENTY-THIRD DAY OF APRIL, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

# APR 26 PM 2 4

2339005 8300

120461277

AUTHENTICATION: 9522168

DATE: 04-23-12

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