

F12000003421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

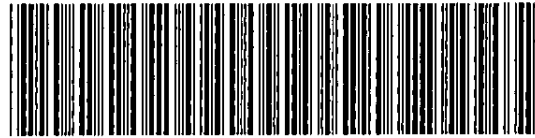
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
8/17/12

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Graham River Outfitters, Ltd.

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:

Gene Lewis

Name of Person

Lewis & White PLC

Firm/Company

222 West Georgia Street

Address

Tallahassee FL 32301

City/State and Zip code

lawlaw@polaris.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gene Lewis

Name of Person

at (850) 212-8271

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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.*

1. Graham River Outfitters LTD, INC.
(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. British Columbia, Canada 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 13, 2012 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 222 West College Avenue, Tallahassee, FL 32301
(Principal office address)

222 West Georgia Street, Tallahassee, FL 32301
(Current mailing address)

8. Real Estate Investment and Development
(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: A. Eugene Lewis

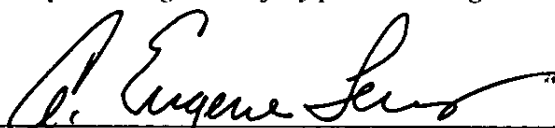
Office Address: 222 West Georgia Street

Tallahassee, Florida 32301
(City) (Zip code)

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

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)

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: William D. Tompkins

Address: SS2, Site 12, Comp. 112

Ft. St. John, BC V1J 4M7

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: William D. Tompkins

Address: SS2, Site 12, Comp. 112

Ft. St. John, BC V1J 4M7 Canada

Director: _____

Address: _____

B. OFFICERS

President: A. Eugene Lewis

Address: 222 West Georgia Avenue

Tallahassee, FL 32301

Vice President: _____

Address: _____

Secretary: William David Tompkins

Address: SS2, Site 12, Comp. 112, Ft. St. John, BC V1J 4M7 Canada

Treasurer: A. Eugene Lewis

Address: 222 West Georgia Street, Tallahassee, FL 32301

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. A. Eugene Lewis, President

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



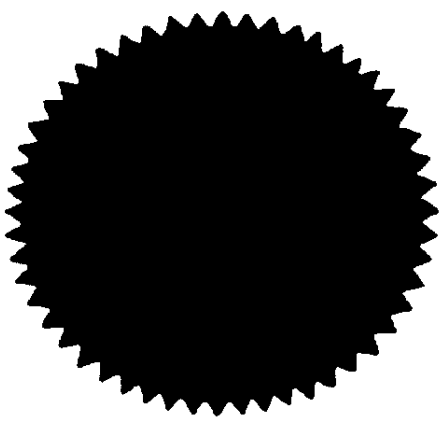
Number: **BC0251610**

**CERTIFICATE
OF
GOOD STANDING**

BUSINESS CORPORATIONS ACT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I Hereby Certify that, according to the corporate register maintained by me, **GRAHAM RIVER OUTFITTERS LTD.** was incorporated as a company under the laws of the Province of British Columbia, is a valid and existing company and is, with respect to the filing of annual reports, in good standing.



Issued under my hand at Victoria, British Columbia
On August 17, 2012

CAROL PREST
Registrar of Companies
Province of British Columbia
Canada