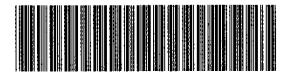
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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

W13-26952



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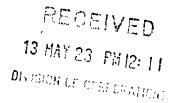
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

× 05/28/3





FLORIDA DEPARTMENT OF STATE Division of Corporations

May 7, 2013

SUNNY L. HILLARY HILLARY, P.A. 605 E. ROBINSON STREET, SUITE 300 ORLANDO, FL 32801

SUBJECT: BATHSPA LTD. Ref. Number: W13000026952

We have received your document for BATHSPA LTD. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

 If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 613A00011177

COVER LETTER

TO: **New Filing Section Division of Corporations**

SUBJECT: Bathspa Ltd.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Sunny L. Hillary
Name of Person Hillary, P.A. 605 E. Robinson Street Suite 300 Address Orlando, FL 32801 City/State and Zip Code sunnv@hillarvlaw.com

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

For further information concerning this matter, please call:

Sunny L. Hillary

at 407 237-0911
Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

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 NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

import in langua in the name at p	Ltd. Inc. ration: must include the word "INCORPORATI age as will clearly indicate that it is a corporatio resent. "Company" or "Co." may not be used as	n instead of a natural person or partnership	if not so contained
Territory	of the British Virgin Islands 3	N/A	
	ntry under the law of which it is incorporated)	(FEI number, if applicable)
Septembe	er 28, 2012	Perpetual	
	Date of Incorporation)	(Duration: Year corp. will cease to exist	t or "perpetual")
N/A			
(Date first cond	ucted affairs in Florida if prior to registration. See	sections 617.1501 & 617.1502, F.S, to dete	rmine penalty liability.)
Williams	House, 20 Reid Street, Ham	ilton HM 11 Bermuda	
		office address)	
_	()		
Same			
	(Current i	nailing address)	
Any act o	or activities which are not pro	hibited under any law	
(Purpose(s) of	corporation authorized in home state or country	to be carried out in the state of Florida)	
. Name and str	eet address of Florida registered agent: (P.). Box NOT acceptable)	30
		,	3 7
Name:	Hillary, P.A.		-L-1
Name:	Hillary, P.A.		
	605 E. Bohinson Street Suite 3	 00	ASSET
Name: Office Address:	605 E. Robinson Street, Suite 30		ASSET
	605 E. Bohinson Street Suite 3		ASSET
	605 E. Robinson Street, Suite 30	00 , Florida 32801 (Zip Code)	Y 23 PH 2: AASSEE, FLO
Office Address: Office Address: Office Address:	Orlando (City) d agent's acceptance: amed as registered agent and to accept ser	, Florida 32801 (Zip Code)	Y 23 PH 12: 59 ANSSEE, FLORIDA Proporation at the place
Office Address: 10. Registered laving been no designated in the current of the c	Orlando (City) d agent's acceptance: amed as registered agent and to accept ser his application, I hereby accept the appoint a comply with the provisions of all statutes	, Florida 32801	ASSEE, FLORIDA orporation at the place of act in this capacity.
Office Address: 10. Registered laving been no designated in the current of the c	Orlando (City) d agent's acceptance: amed as registered agent and to accept ser his application, I hereby accept the appoin	, Florida 32801	ASSEE, FLORIDA orporation at the place of act in this capacity.
Office Address: 10. Registered laving been no designated in the current of the c	Orlando (City) d agent's acceptance: amed as registered agent and to accept ser his application, I hereby accept the appoint a comply with the provisions of all statutes	, Florida 32801	ASSEE, FLORIDA orporation at the place of act in this capacity.
Office Address: 10. Registered laving been no designated in the current of the c	Orlando (City) d agent's acceptance: amed as registered agent and to accept ser his application, I hereby accept the appoin o comply with the provisions of all statutes in familiar with and accept the obligations	, Florida 32801, Florida 32801 (Zip Code) vice of process for the above stated comment as registered agent and agree to relative to the proper and complete pof my position as registered agent.	ASSEE, FLORIDA orporation at the place of act in this capacity.
Office Address: 10. Registered laving been no designated in the current of the c	Orlando (City) d agent's acceptance: amed as registered agent and to accept ser his application, I hereby accept the appoin o comply with the provisions of all statutes in familiar with and accept the obligations	, Florida 32801	ASSEE, FLORIDA orporation at the place of act in this capacity.

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 addresses of officers and/or directors

A. DIF	RECTORS		
Chairma	an: N/A	SE	<u> </u>
Address		AHA	2
		88.7 88.7 1	23 ["
Vice Ch	nairman: N/A	TO.	
Address		DRIDA	Si Control
Director	William F. Maycock		
Address	c/o Winchester Fiduciary Services Limited Williams House 20 Reid Street Hamilton	HM 11	, Bermuda
Director	David Goodwin	### · · · · · · · · · · · · · · · · · ·	
	c/o Winchester Fiduciary Services Limited, Williams House, 20 Reid Street, Hamilton	HM 11	, Bermuda
	FFICERS nt: William F. Maycock c/o Winchester Fiduciary Services Limited, Williams House, 20 Reid Street, Hamilton	1 HM 11	, Bermuda
Vice Pre	esident: David Goodwin		
Address	c/o Winchester Fiduciary Services Limited, Williams House, 20 Reid Street, Hamilton	1 HM 11	, Bermuda
Secretar	c/o Winchester Fiduciary Services Limited		
Address	Williams House, 20 Reid Street, Hamilton HM 11,	Bern	nuda
	ner: N/A		
Address			
NOTE 13	Signature of Chairman, Vice Chairman or any officer listed in number 12 of the apple Villiam F. Maycock		
14	(Typed or printed name and capacity of person signing application)		

TERRITORY OF THE BRITISH VIRGIN ISLANDS BVI BUSINESS COMPANIES ACT, 2004

CERTIFICATE OF GOOD STANDING (SECTION 235)

The REGISTRAR OF CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIES that, pursuant to the BVI Business Companies Act, 2004 at the date of this certificate, the company,

Bathspa Ltd.

BVI COMPANY NUMBER: 1735945

- 1. Is on the Register of Companies;
- 2. Has paid all fees and penalties due under the Act;
- 3. Has not filed articles of merger or consolidation that have not become effective;
- 4. Has not filed articles of arrangement that have not yet become effective;
- 5. Is not in voluntary liquidation;
- 6. Is not in liquidation under the Insolvency Act, 2003;
- 7. Is not in receivership under the Insolvency Act, 2003;
- 8. Is not in administrative receivership; and
- 9. Proceedings to strike the name of the company off the Register of Companies have not been instituted.



Much

REGISTRAR OF CORPORATE AFFAIRS

9th day of April, 2013