

COVER LETTER

TO: Registration Section
Division of Corporations
Stingray Adventures Ltd.

SUBJECT: _____
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:
Matthew Miller

Name of Person
Miller Watson PLLC

Firm/Company
222 US Hwy 1, Ste. 211

Address
Tequesta, Florida 33469

City/State and Zip code
matt.miller@yachtingattorney.com

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

For further information concerning this matter, please call:

Matthew Miller 561 316-2032

Name of Person at () Daytime Telephone Number
Area Code

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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.

Stingray Adventures Ltd. Co.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Cayman Islands

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

September 24, 2009

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

107 Mary Street, George Town, P.O. Box 10117 APO, Grand Cayman, Cayman Islands KY1-1001

7. _____
(Principal office street address)

222 US Hwy 1, Ste. 211, Tequesta, FL 33469

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Miller Watson PLLC

Name:

222 US Hwy 1, Ste. 211

Office Address:

Tequesta

33469

(City)

, Florida _____
(Zip code)

9. 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)

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Duncan Heard

☐ Chairman Name: _____
107 Mary Street
☐ Vice Chairman Address: _____
George Town
☒ Director _____
Grand Cayman KY1-1001, Cayman Islands
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Matthew Miller, Attorney-in-fact

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

CR-231255

Certificate Of Good Standing

TO WHOM IT MAY CONCERN

I DO HEREBY CERTIFY that

Slingsay Adventures Ltd.

a company duly organised and existing under and by virtue of the Acts of The Cayman Islands
is at the date of this certificate in Good Standing with the office, and duly authorised to
exercise therein all the powers vested in the company;

Given under my hand and Seal at George Town in the
Island of Grand Cayman this 24th day of May
Two Thousand Twenty-Two



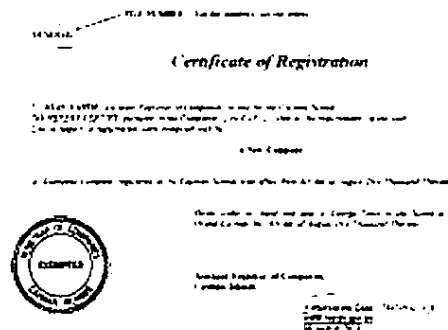
An Authorised Officer,
Registry of Companies,
Cayman Islands.



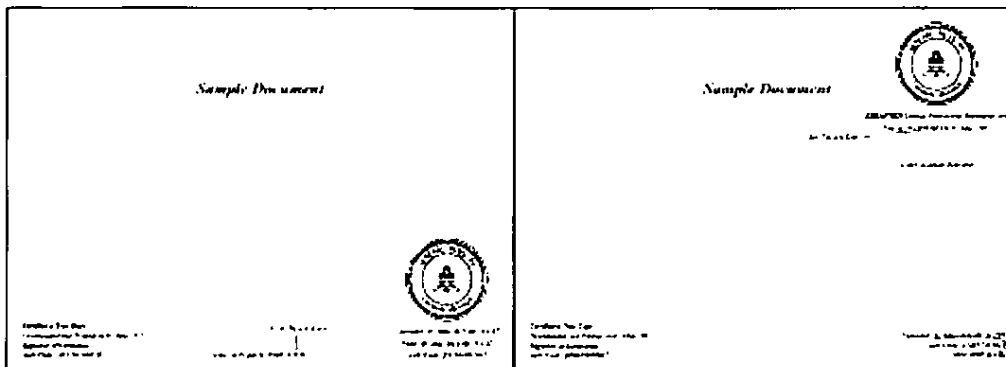
Cayman Islands Online General Registry

Certificate and Stamped Document Validation

All certificates issued by the Registrar of Companies, Cayman Islands may be validated/authenticated online. To verify the validity of a certificate you will need the entity file number and the authorisation code from the certificate. Click [here](#) to view where the information is located on the certificate.



Documents stamped by the Registrar of Companies, Cayman Islands may also be validated/authenticated online. To verify the validity of a stamped document you will need the entity file number and the authorisation code from the document. Click [here](#) to view where the information is located on the document.



Authorisation Code: *

'928297188783

Entity File Number: *

cr-231255

[Click here to validate a certificate](#)

[Clear](#)



This certificate was issued by the Cayman Islands General Registry for **STINGRAY ADVENTURES LTD.** on date **24-May-2022**, type of certificate **Company Good Standing Certificate**.