

PI3000043424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

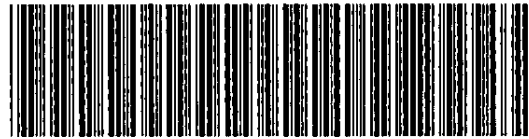
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/29/13 --01035--020 \*\*128.75

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13 MAY 14 AM 10:35  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

4/30

W13-25416 98

## COVER LETTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Domestication of Thames Trading Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

**FEES:**

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

**OPTIONAL:**

Certificate of Status	\$ 8.75
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Michael Shaw

Name (printed or typed)

509 South Ponce de Leon Blvd.,

Address

St. Augustine, Fl 32084

City, State & Zip

(904 669 9599)

Daytime Telephone Number

Jamie@englishlanding.net ✓

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

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13 MAY 14 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 30, 2013

MICHAEL SHAW  
509 S PONCE DE LEON BLVD  
ST. AUGUSTINE, FL 32084

SUBJECT: THAMES TRADING INC.  
Ref. Number: W13000025416

RECEIVED  
13 MAY 14 PM 12:35  
DIVISION OF CORPORATIONS

We have received your document for THAMES TRADING INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) I.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return 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.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 613A00010398

RECEIVED  
13 MAY 14 PM 12:32  
DIVISION OF CORPORATIONS

## CERTIFICATE OF DOMESTICATION

The undersigned, Michael Shaw, Secretary, Treasurer,  
(Name) (Title)

of Thames Trading Inc. a foreign corporation,  
(Corporation Name)

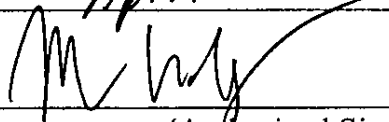
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was January 25th, 1988.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Wilmington, Delaware F93-2182.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Thames Trading Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Thames Trading Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Delaware.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Michael Shaw ST, of Thames Trading Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done

so this the 20<sup>th</sup> day of April, 2013.

  
(Authorized Signature)

### Filing Fee:

Certificate of Domestication  
Articles of Incorporation and Certified Copy  
Total to domesticate and file

\$ 50.00  
\$ 78.75  
\$128.75

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TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

Thames Trading Inc.

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

509 South Ponce de Leon Blvd

509 South Ponce de Leon Blvd.,

St. Augustine,

St. Augustine,

FL 32084

FL 32084

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Marina and boat related activity.

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TALLAHASSEE, FLORIDA

**ARTICLE IV    SHARES    3000**

THE NUMBER OF SHARES OF STOCK IS: \_\_\_\_\_

**ARTICLE V    INITIAL DIRECTORS AND/ OR OFFICERS**

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

**ST D    Shaw, Michael**

509 South Ponce de Leon Blvd.,

**St. Augustine, Fl    32084**

Title/Name

**D    Babiker, Kim**

509 South Ponce de Leon Blvd.,

**ST. Augustine, Fl    32084**

Title/Name

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Title/Name

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Title/Name

**P FD    Shaw, Julia**

509 South Ponce de Leon Blvd.,

**St. Augustine, Fl    32084**

Title/Name

Title/Name

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Title/Name

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FLORIDA

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

**THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:**

Sterling James H

509 South Ponce de Leon Blvd.,

St. Augustine, Fl 32084

**ARTICLE VII INCORPORATOR**

**THE NAME AND ADDRESS OF THE INCORPORATOR IS:**

Shaw, Michael

509 South Ponce de Leon Blvd.,

St. Augustine, Fl 32084

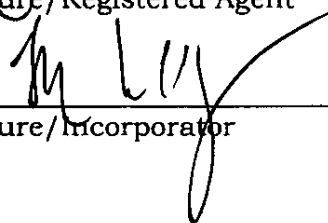
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TALLAHASSEE, FLORIDA

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**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.**

  
Signature/Registered Agent

4-20-13  
Date

  
Signature/Incorporator

4-20-13  
Date