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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

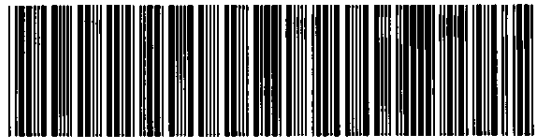
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 6/9/09

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Trilady Marine 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," 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:

Att. C.M. Steiner

Name of Person

Firm/Company

10610 Rhode Island Ave

Address

Suite 300 Beltsville, MD 20705

City/State and Zip code

cms@steinerfamily.net

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

For further information concerning this matter, please call:

Jeffrey W. Cox Esq.

Name of Person

at (561) 747-8266

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. Trilady Marine 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. Cayman Islands 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/4/2001 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. No business transacted in Florida to date.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. P.O. BOX 268 GT, Grand Cayman Cayman Islands
(Principal office address)
10610 Rhode Island Ave, Suite 300, Beltsville, MD, 20705
(Current mailing address)

8. Any lawful purpose
(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: C.M. Steiner

Office Address: 13780 Rivoli Drive

Palm Beach Gardens, Florida 33410
(City) (Zip code)

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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.

[Handwritten signature]
(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: Charles Martin Steiner

Address: 10610 Rhode Island Ave, Suite 300, Beltsville, MD, 20705

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: Campbell Secretaries Limited

Address: Scotia Centre, P.O. BOX 268 GT, Grand Cayman Cayman Islands

Treasurer: _____

Address: _____

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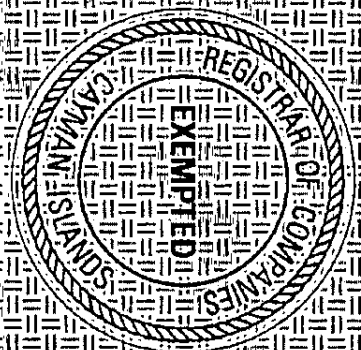
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. Charles Martin Steiner

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



GB-1143227

Certificate Of Good Standing

TOWHOM-IT-MAY-CONCERN

ADOHERBY CERTIFY that

Trinity Marine Ltd

is a company which is organized and existing under and by virtue of the laws of The Cayman Islands is at the date of this certificate in Good Standing with the office and duly authorized to exercise the rights and powers vested in the company.

Given under my hand and Seal at George Town in the Island of Grand Cayman this 25th day of March

Two Thousand Nine

An Authorized Officer,
Registry of Companies,
Cayman Islands

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TALLAHASSEE, FLORIDA