

P10000046433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

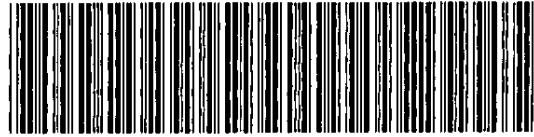
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 JUN -2 PM 3:56

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MRD
4/2

FILED

10 JUN -2 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Aquatic Wilderness Adventures
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Angie Redmond
Name (Printed or typed)

2110 Lighthouse Rd. #
Address

Carrabelle Fl. 32322
City, State & Zip

850-899-4133
Daytime Telephone number

Angie redmond1@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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10 JUN -2 PM 4:18

ARTICLE I NAME

The name of the corporation shall be:

Aquatic Wilderness Adventures Inc.

SECRETARY OF STATE
PALM HARBOR, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2110 Lighthouse Rd. Carrabelle, Fl. 32322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Kayak rentals

ARTICLE IV SHARES

The number of shares of stock is:

50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Angie Redmond
2110 Lighthouse Rd. Carrabelle, Fl. 32322

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Angie Redmond
2110 Lighthouse Rd. Carrabelle, Fl. 32322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Angie Redmond
2110 Lighthouse Rd. Carrabelle, Fl. 32322

Having been named as registered agent 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

Angie Redmond

Signature/Registered Agent

6-2-10

Date

Angie Redmond

Signature/Incorporator

6-2-10

Date