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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : KOEPEL LAW GROUP, P.A.  
Account Number : I20070000064  
Phone : (561)659-6455  
Fax Number : (561)659-7006

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DIVISION OF CORPORATIONS  
STATE OF FLORIDA

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
AQUAMARS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
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AUG 2 2015  
S. GILBERT

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

SECRETARY OF STATE  
PALM BEACH COUNTY, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

AQUAMARS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

400 S. AUSTRALIAN AVE #300

WEST PALM BEACH, FL 33401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE RENTAL.

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARMINE D'ARGENIO, P/D

Name and Title:

Address 2985 CHICOUTIMI

Address:

LAVAL, QUEBEC

CANADA H7E 1B3

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: JOEL P. KOEPEL, ESQ.  
 Address: 400 S. AUSTRALIAN AVE #300  
WEST PALM BEACH, FL 33401

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JOEL P. KOEPEL, BSQ.  
 Address: 400 S. AUSTRALIAN AVE #300  
WEST PALM BEACH, FL 33401

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

\_\_\_\_\_  
 Required Signature/Registered Agent

8/21/15  
 Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*

\_\_\_\_\_  
 Required Signature/Incorporator

8/21/15  
 Date

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