

FI/000000358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100192262231

01/24/11--01032--022 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 JAN 24 PM 3:51

APPROVED
AND
FILED

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: M.S.M. Organization, Inc.
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:

Mike Morris
Name of Person

M.S.M. Organization, Inc. "Water taxi Party Boat"
Firm/Company *fictitious name*

1001 Seafarer Circle Unit 303
Address

Jupiter, FL 33477
City/State and Zip code

gailrene@optonline.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Morris at 732 939-3464
Name of Person 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. M.V.M. Organization, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

2. "Water Taxi Party Boat" fictitious name
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

3. NI 4. 223360502
(State or country under the law of which it is incorporated) (FEI number, if applicable)

5. 11/14/94 6. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

8. Seasport Marina 1095 N. A1A Jupiter, FL 57500
(Principal office address)

1001 Seafarer Circle Unit 303 Jupiter FL 33477
(Current mailing address)

9. water taxi, tour boat
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: Mike Morris

Office Address: 1001 Seafarer Circle Unit 303
Jupiter, Florida 33477
(City) (Zip code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 JAN 24 PM 3:51

APPROVED
AND
FILED

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.


(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.

APPROVED
AND
FILED

11 JAN 24 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Mike Morris

Address: 1001 Seafarer Circle Unit 303
Jupiter, FL 33477

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Mike Morris

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. Mike Morris

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

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
SHORT FORM STANDING**

APPROVED
AND
FILED

11 JAN 24 PM 3:51

M.J.M. ORGANIZATION, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0100606544

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on November 14, 1994.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

2009

I further certify that the registered agent and registered office are:

*Michael J Morris
223 Drum Point Road
Brick, NJ 08723*



Certification# 119304495

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
21st day of January, 2011*

*Andrew P Sidamon-Eristoff
State Treasurer*