F1600004334

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S Warren SEP 29 2016



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2016

KEVIN B. SAPP P.O. BOX 6516 KEY WEST, FL 33041

SUBJECT: NEMESIS MARINE, INC.

Ref. Number: W16000064007

We have received your document for NEMESIS MARINE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 216A00019812

COVER LETTER

TO:	Registration S Division of Co					
SUR	JECT:		NEMESIS MA	ARINE I	NC.	
<i></i>		Name	of corporation	- must	include suffix	
Dear	Sir or Madam:					
"Cert	ificate of Existen		e of Good Star	nding" a	nd check are sub	ct Business in Florida," mitted to register the
Pleas	e return all corres	spondence concerr	ning this matter	to the f	following:	
			KEVIN B	. SAPP		
			Name of	Person		
			NEMESIS MA	RINE IN	C.	
-			Firm/Com	pany		
			P.O. BO	K 6516		
			Addre	ess	 	
			KEY WEST,	FL. 3304	11	
			City/State a			
		KE	VIN.SAPP98@	GMAII	COM	
		E-mail addres	s: (to be used t	for futur	e annual report i	notification)
For fi	urther information	n concerning this r	natter, please o	call:		
	DANIEL FOR	D	at ()	847-3222	
	Name of Pers	on	Area Cod	e	Daytime Telep	hone Number
	Registration S Division of Co Clifton Buildin 2661 Executiv Tallahassee, F	orporations ong e Center Circle L 32301			MAILING A Registration S Division of Co P.O. Box 6323 Tallahassee, F	ection orporations 7
Enclo	sed is a check for	r the following am	ount:			
□ \$7	70.00 Filing Fee	□ \$78.75 Filir Certificate	-		5 Filing Fee & ied Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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. NEMESIS MAI	RINE INC.			
	corporation; must included or p," "lnc," "Co," or "		COMPANY," "CORPORATI	ON,"
·				
(If name unavail	able in Florida, enter a	Iternate corporate name adop	oted for the purpose of transac	ting business in Florida)
2.	TEXAS	3.	N/A	
(State or countr	y under the law of whi	ch it is incorporated)	(FEI number, if applicable)	
4.	JUNE 18th 2016	5.	PERPECTUAL	
(Date of incorporation)			(Date of duration, if oth	er than perpetual)
6.		N/A		
			orida, if prior to registration) F.S., to determine penalty lial	pility)
7.		615 CAROLINE ST.	KEY WEST, FL. 33040	
		(Principal c	office address)	
		P. O. BOX 6516 KEY	WEST, FL. 33041	
		(Current mailing a	ddress, if different)	1 m2 1 m2 1 m2
8. Name and stre	et address of Florida	registered agent: (P.O. E	ox NOT acceptable)	
Name:	DANIEL FORD			
Office Address:	615 CAROLINE S	Т.		A 8: 45 A STATE
	KEY WEST		, Florida <u>33040</u>	DM 50
		(City)	(Zip code)	

9. 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)

10. 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.

A. DIRECTORS

KEVIN B. SAPP			
859 EAGLE POINTE DR.			
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KEVIN B. SAPP			
859 EAGLE POINT DR.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	, t 1 pro p. 1 p.
MONTGOMERY, TX. 77316			
N/A			
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MONTGOMERY, TX, 77316	V 3.	15.	
dent:			
KEVIN B. SAPP			
KEVIN B. SAPP			
859 FAGLE POINTE DR. MONTGOMERY, TX. 77316			
If necessary, you may attach an addendum to the application listing addition	onal officers a	nd/or o	directors.
Kin B Sag			
er or director signing this document (and who is listed in number 11 above and that he or she is aware that false information submitted in a document t	e) affirms that		
KEVIN B. SAPP - PRESIDENT			
	859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 TMAN: N/A KEVIN B. SAPP 859 EAGLE POINT DR. MONTGOMERY, TX. 77316 N/A ICERS KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 ident: KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 ident: KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 If necessary, you may attach an addendum to the application listing additional content of the content of	859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINT DR. MONTGOMERY, TX. 77316 N/A ICERS KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 If necessary, you may attach an addendum to the application listing additional officers a Signature of Director or Officer ser or director signing this document (and who is listed in number 11 above) affirms that and that he or she is aware that false information submitted in a document to the Department agree felony as provided for in s.817.155, F.S.	859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINT DR. MONTGOMERY, TX. 77316 N/A ICERS KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 KEVIN B. SAPP 859 EAGLE POINTE DR. MONTGOMERY, TX. 77316 If necessary, you may attach an addendum to the application listing additional officers and/or offic

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Nemesis Marine, Inc. (file number 802482656), a Domestic For-Profit Corporation, was filed in this office on June 18, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 13, 2016.



Carlos H. Cascos Secretary of State