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2022 MAR -7 PM 3:59

JUN - 2 2022

K. Brumbley

COVER LETTER

TO: Registration Section
Division of Corporations
Aquatic Holdings, Inc.

SUBJECT: _____
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:
Amanda Dunn

	Name of Person
Aquatic Holdings, Inc.	
	Firm/Company
80 Miracle Strip Pkwy SE	
	Address
Fort Walton Beach, Florida 32548	
	City/State and Zip code
amanda.aquaticholdings@gmail.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Amanda Dunn	423	305-8398
	at (_____)	
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration 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. Aquatic Holdings, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Aquatic Holdings FL, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Tennessee 47-4126980

2. 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)
5/28/2015

4. 5.
(Date of incorporation) (Date of duration, if other than perpetual)
4/1/2022

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
80 Miracle Strip Pkwy SE, Fort Walton Beach FL 32548

7.
(Principal office address)

(Current mailing address, if different)

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

Name: Amanda Dunn
Office Address: 80 Miracle Strip Pkwy SE
Fort Walton Beach, Florida 32548
(City) (Zip code)

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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.

Aquatic Holdings Inc, Amanda Dunn
(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

Darrell Jones

President: _____

937 Creek Road

Address: _____

Wildwood GA 30757

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. _____


Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Darrell Jones

13. _____

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



Tre Hargett
Secretary of State

Division of Business Services
Department of State

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

AMANDA DUNN
7060 HIXSON PIKE
HIXSON, TN 37343

March 1, 2022

Request Type: Certificate of Existence/Authorization
Request #: 0462990

Issuance Date: 03/01/2022
Copies Requested: 1

Document Receipt

Receipt #: 006967312 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3824445226 \$20.00

Regarding: Aquatic Holdings, Inc.
Filing Type: For-profit Corporation - Domestic Control #: 801406
Formation/Qualification Date: 05/28/2015 Date Formed: 05/28/2015
Status: Active Formation Locale: TENNESSEE
Duration Term: Perpetual Inactive Date:
Business County: HAMILTON COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Aquatic Holdings, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

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