TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	1000004	1996	OI JUL 12 SECRETARY TALLAHASSEE	ED AM 9: 37 OF STATE FLORIDA	
SUBJECT: Foundation for Instruction in Davigation & Seamanshi, (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX) Inc.					
		90	00044718 -07/12/0101 *****78.75	3097 072008 *****78.75	
Enclosed is 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		
		ADDITIONAL CO	PY REQUIRED		
FROM: Dana Goodwin Name (Printed or typed)					
	13510 Garri	idress Dr.	-		
	Hudson Fl	34667 tate & Zip	<u>.</u>		

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

	In Compliance with Chapter 617, F.S., (Not for Profit)
,	ARTICLE I NAME The name of the corporation shall be: Foundation for Instruction in Navigation and Seamanship, Inc.
	Seamanship, Inc.
	<i>,</i>
	ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
	13510 Garris Dr. Hudson FL
	135 10 Garris Dr. Mason 1 C
	34667
	ARTICLE III PURPOSE
	ARTICLE III PURPOSE The purpose for which the corporation is organized is: To allow youth ages 14-20 to participate in boating Safety, water activities, and environmental awareness.
	participate in boating safety, water
	activities and environmental.
	awateness.
	ARTICLE IV MANNER OF ELECTION
	The manner in which the directors are elected or appointed: Annual election
	Annual Cellin,
	ARTICLE V INITIAL DIRECTORS OFFICERS
	The name and addresses:
	The halfe and addresses.
	· · · · · · · · · · · · · · · · · · ·
	ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS
	The name and Warida street address of the registered event is:
	Dava Goodwin 1350 Garris Dr. Hudson Fl 34687
	Dava Goodwin 13500 3 -1113 C.
	Hudson FC 34662
	ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
	The name and address of the Incorporator is: Dave Goodwin 13510 Garris Dr. Hudson FC 34667
	Dana 6-3000011 13510 8-1115 Dr.
	Hudson FC 34662
*	**************************************
H	aving been named as registered agent to accept service of process for the above stated corporation at the place designated
	this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.
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4	hava Stoodus 6-29-01
Ś	gnature/Registered Agent Date
_	Mana Stooden. 6-29-01
S	gnature/Incorporator Date