

N16000003192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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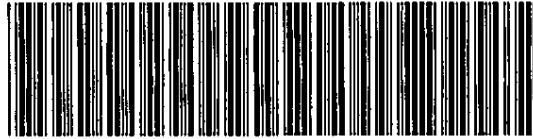
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0228-15

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Save The Sharks, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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 COPY REQUIRED

FROM: Susana Navajas

Name (Printed or typed)

4780 SW 141 AVE

Address

Miami, FL 33175

City, State & Zip

3053021313

Daytime Telephone number

sav3thesharks@gmail.com

E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Save The Sharks, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
4780 SW 141 AVE

Miami, FL 33175

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to better the status of the world's oceans through positive shark interactions.

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TALLAHASSEE, FLORIDA

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: yearly, by majority.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Susana Navajas, Founder & Director

Address: 4780 SW 141 AVE

Miami, FL 33175

Name and Title: Almudena Villarreal, Vice-President

Address: Sierra la Giganta lote 30 manzana 22

Colonia 8 de octubre 2nda seccion

La Paz bcs, Zc: 23085

Name and Title: Rose Montoya, Secretary

Address: 760 SW 13 ST

Homestead, FL 33034

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

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: Susana Navajas
 Address: 4780 SW 141 AVE
Miami, FL 33175

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 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Susana Navajas
 Address: 4780 SW 141 AVE
Miami, FL 33175

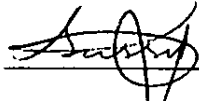
ARTICLE VIII EFFECTIVE DATE:

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.)

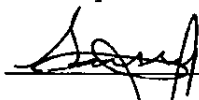
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

 Susana Navajas
 Required Signature of Registered Agent

3/16/16
 Date

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

 Susana Navajas
 Required Signature of Incorporator

3/16/16
 Date