12/7/2020

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000418376 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PARASEC Account Number : 120180000086 Phone : (916)576-7000 Fax Number : (800)603-5868

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: RLOPS@PARASEC.COM

FLORIDA PROFIT/NON PROFIT CORPORATION

His Boats Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Desrick Thompson, 7-1110/2020

ARTICLES OF INCORPORATION

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

1 <i>RTICLE</i>	II PRINCIPAL OFFICE			
	Principal street address:		Mailing address, if different is	
_	805 Amella Circle Fernandina Beach	FL 32034	maning address, it different is	•
_				12
				-
RTICLE	III PURPOSE			1
не ригроз	e for which the corporation is organized is	Boating adventures for Mi	litary Veterans	
				_
TICLE <u>I</u>	V MANNER OF ELECTION The m The directors will be appointed by			
TICLE V	The directors will be appointed by INITIAL OFFICERS AND/OR DIRE	vote of the existing board m	embers,	
TICLE V	The directors will be appointed by INITIAL OFFICERS AND/OR DIRE itle: William Pitts - President	vote of the existing board m	embers,	
TICLE V	The directors will be appointed by INITIAL OFFICERS AND/OR DIRE Itle: William Pitts - President 805 Amelia Circle	vate of the existing board m CTORS Name and Title: Carol F	embers,	
TICLE V	The directors will be appointed by INITIAL OFFICERS AND/OR DIRE itle: William Pitts - President	vate of the existing board m CTORS Name and Title: Carol F Address: 805 Am	embers, Pitts - Secretary	
ne and Ti	The directors will be appointed by INITIAL OFFICERS AND/OR DIRE Itle: William Pitts - President 805 Amelia Circle Fernandina Beach FL 32034	vote of the existing board m CTORS Name and Title: Carol F Address: 805 An Fernan	embers, Pitts - Secretary netia Circle dina Beach FL 32034	
TICLE Portion of Title and Title and Title and Title and Title	The directors will be appointed by INITIAL OFFICERS AND/OR DIRECTOR Itle: William Pitts - President 805 Amelia Circle Fernandina Beach FL 32034	vate of the existing board m CTORS Name and Title: Carol F Address: 805 Am Fernan Name and Title:	embers, Pitts - Secretary netia Circle dina Beach FL 32034	-
ne and Ti	The directors will be appointed by INITIAL OFFICERS AND/OR DIRE Itle: William Pitts - President 805 Amelia Circle Fernandina Beach FL 32034 Itle: Joe Murphy - Treasurer PO BOX 15698	Name and Title: Carol F Address: 805 Am Fernan Name and Title:	embers, Pitts - Secretary netia Circle dina Beach FL 32034	
TICLE P me and Ti dress	The directors will be appointed by INITIAL OFFICERS AND/OR DIRECTOR Itle: William Pitts - President 805 Amelia Circle Fernandina Beach FL 32034	Name and Title: Carol F Address: 805 Am Fernan Name and Title:	embers. Pitts - Secretary nelia Circle dina Beach FL 32034	-
me and Tidress	The directors will be appointed by INITIAL OFFICERS AND/OR DIRI Ric: William Pitts - President 805 Amelia Circle Fernandina Beach FL 32034 Ric: Joe Murphy - Treasurer PO BOX 15698 Fernandina Beach, FL, 32035	vate of the existing board m CTORS Name and Title: Carol F Address: 805 Am Fernan Name and Title: Address:	embers. Pitts - Secretary nelia Circle dina Beach FL 32034	
ne and Tidress	The directors will be appointed by INITIAL OFFICERS AND/OR DIRE Itle: William Pitts - President 805 Amelia Circle Fernandina Beach FL 32034 Itle: Joe Murphy - Treasurer PO BOX 15698	Name and Title: Address: Address: Name and Title: Name and Title: Name and Title:	embers. Pitts - Secretary nelia Circle dina Beach FL 32034	-

Name and		Name and Title:	
Title: Address_		Address:	
_			
Name and			
_			
Title: Address _		Address:	
_		·	
The name and El	REGISTERED AGENT		
	orida street address (P.O. Box NOT acc	eptable) of the registered agent is:	501
Name:	William Pitts		
Address :			.;
	Fernandina Beach FL 32034		•
	NCORPORATOR ress of the Incorporator is: Steven Zenovieff		
Name:			
Address:	2804 Gateway Oaks Drive, Ste 100		
	Sacramento, CA 95833	····	
Effective date, if our	FFECTIVE DATE: ter than the date of filing: tis listed, the date must be specific and	(OPTIONAL)	or or 90 days after the filling)
Note: If the date ins	erted in this block does not meet the appl. date on the Department of State's record.	icable statutory filing convirgnments.	
Having been named certificate, I am fami	us registered agent to accept service of flar with and accept the appointment as re	procass for the above stated corpora egistered agent and agree to act in th	rtion at the place designated in this is capacity
		· · · · · · · · · · · · · · · · · · ·	1213170
	Required Signature of Registered Ag		Date
I submit this docume to the Department of	nt and uffirm that the facts stated herein of State constitutes a third degree felony as p	are true. I am aware that any false in provided for in s.817.155, F.S.	formation submitted in a document
			12/2/2020
·	Required Signature of Incorpora	ator	12/2/2020

Date