

P00000102161

TRANSMITTAL LETTER

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

300003443483--4
-10/30/00--01090--006
*****70.00 *****70.00

SUBJECT: Boat Doctor's Quarters, 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Charles Lamasa, Attorney at Law
Name (Printed or typed)

1023 Cathedral St.

Address

Baltimore, MD 21201

City, State & Zip

410-727-4131

Daytime Telephone number

FILED
00 OCT 30 PM 12:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

gy 10/31

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Boat Doctor's Quarters, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

22815 Cudjoe Drive
Cudjoe Shores, Florida 33042

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purchase and sale of marine parts and boats.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Gerald Lee Harkins
22815 Cudjoe Drive
Cudjoe Shores, Florida 33042

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

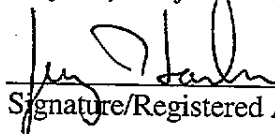
Gerald Lee Harkins
22815 Cudjoe Drive
Cudjoe Shores, Florida 33042

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gerald Lee Harkins
22815 Cudjoe Drive
Cudjoe Shores, Florida 33042

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


Signature/Registered Agent / Incorporator

8-19-00
Date

FILED
00 OCT 30 PM 12:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA