

TRANSMITTAL LETTER

PO 0000026680

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

SUBJECT: Atlantic Endcavors, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900003831369--9
-03/12/01--01131--004
*****87.50 *****87.50

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: DAVID WARREN
Name (Printed or typed)

P.O. Box 1131
Address

Palm City, FL 34991
City, State & Zip

561 - 223 - 8908
Daytime Telephone number

FILED
01 MAR 12 PM 4: 33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Feb
3/14

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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:

Atlantic Endeavors, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 1131
Palm City, FL 34991

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wholesale / Distribution

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

DAVID WARREN
1811 S.W. Mepp Rd.
Palm City, FL 34990

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVE WARREN
P.O. Box 1131
Palm City, FL 34991

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

David M. Warren
Signature/Registered Agent

03/07/01
Date

David M. Warren
Signature/Incorporator

03/07/01
Date

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TALLAHASSEE, FLORIDA