

TRANSMITTAL LETTER

PO10000089662

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

Blue Water Marine Accessories & Custom Components, Inc.

SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600004577926--5
-09/10/01--01078--007
*****78.75 *****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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Micahel C. Shorette
Name (Printed or typed)

P.O. Box 778
Address

Eagle Lake, Florida 33839
City, State & Zip

(863) 298-9295
Daytime Telephone number

FILED
01 SEP 10 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

G. BULLOCK SEP 12 2001

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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:

Blue Water Marine Accessories & Custom Components, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 778
Eagle Lake Florida 33839

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The sale and or manufacturing of Marine Accesories and Custom Components for Boats

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Michael C. Shorette
P.O. Box 778
Eagle Lake, Florida 33839

ARTICLE VI REGISTERED AGENT

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

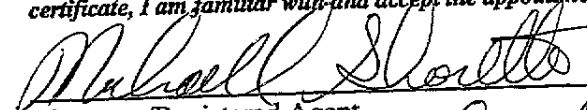
Michael C. Shorette
227 Lily Pad Lane
Winter Haven, Florida 33880

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael C. Shorette
P.O. Box 778
Eagle Lake Florida 33839

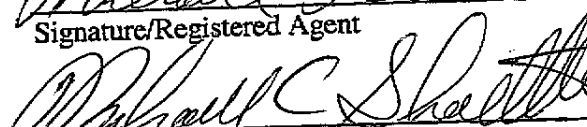
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

Date

8/27/01



Signature/Incorporator

Date

8/27/01

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA