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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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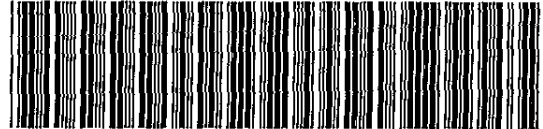
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 NOV 17 PM 6:15

FILED

TRANSMITTAL LETTER

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

SUBJECT: NATIONAL MARINE REPAIR CENTER, INC.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$87.50 for the Filing Fee, Certified Copy & Certificate of Status

From:

EDGAR BELAVAL, Esq.
BELAVAL & ORTEGO, P.A.
27501 South Dixie Highway, Suite 403
Homestead, Florida 33032

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607

FILED

ARTICLE I NAME

The name of the corporation shall be:

NATIONAL MARINE REPAIR CENTER, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

24607 Packinghouse Road
Princeton, Florida 33032

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all business permitted under the laws of the United States and the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Douglas Worth, Co-Director
24607 Packinghouse Road
Princeton, Florida 33032

Paul Mitten, Co-Director
24607 Packinghouse Road
Princeton, Florida 33032

ARTICLE VI REGISTERED AGENT

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

Edgar Belaval, Esq.
BELAVAL & ORTEGO, P.A.
27501 South Dixie Highway, Suite 403
Homestead, Florida 33032

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Douglas Worth
24607 Packinghouse Road
Princeton, Florida 33032

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

Signature/Incorporator

Date