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(Re	equestor's Name)		
(Ac	ldress)		
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(Ci	ty/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
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Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		
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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT: A Bo	at4U, Inc.			
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status	
FROM: _S	am Stoia			
	Name (Printed or typed)		
P.O. Box 888				
	A	ddress		
	Key Largo, Florida 33037			
	City,	State & Zip	······	
	305-852-=2025			
•	Daytime Te	lephone number		

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

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: A BOAT4U, INC.

DIVISION OF CORPORATIONS

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O. BOX 888
KEY LARGO, FLORIDA 33037

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

SAM STOIA 97951 OVERSEAS HWY. KEY LARGO, FLORIDA 33037

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SAM STOIA P.O. BOX 888 KEY LARGO, FLORIDA 33037

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

Date

Date

Date