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| (Re | equestor's Name) | |
|-------------------------|--------------------|------------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| · (Cit | ty/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Ви | siness Entity Nam | e) |
| (Do | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| | Office Use Only | |
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TRANSMITTAL LETTER

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

| SUBJECT: LJJ I | Marine, Inc. | | |
|----------------------|-----------------------------------|---|---|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INC</u> L | udiasurem) |
| Enclosed are an orig | inal and one (1) copy of the arti | icles of incorporation and | a check for: |
| \$70.00 Filing Fee | | S78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: L | ynda Marie Arter | | |
| | Name | (Printed or typed) | |
| | P.O. Box 28224 | | |
| | Vince (1984) | Address | |
| | Jacksonville, FL 32226-82 | 224 | |
| | City | , State & Zip | |
| | 904-751-2050 | Telephone number | |
| | Daytine | I CICMICIT HUMINOLI | |

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:

LJJ Marine, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

731 Kennilworth Street, Jacksonville, FL 32208, P.O. Box 28224, Jacksonville, FL 32226,

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Marine Holding company to do business in the state of Florida

ARTICLE IV SHARES

The number of shares of stock is:

1.000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Lynda Marie Arter, President and Director, P.O. Box 28224, Jacksonville, FL 32226-8224

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

Lynda Marie Arter, 731 Kennilworth Street, Jacksonville, FL 32208

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lynda Marie Arter, P.O. Box 28224, Jacksonville, FL 32226-8224

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

Lynda Marie Octes
Signature/Registered Agent

Lynda Marie Ostes

4- --

Signature/Incorporator

Date