

PO5000123463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Stephen P. Grab GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Article III  
DATE 9/19/05  
DOC. EXAM MKD

Office Use Only



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09/06/05--01032--002 \*\*70.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
05 SEP -6 AM 11:52

med  
9/19

## TRANSMITTAL LETTER

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

SUBJECT: Aquanautical Adventures, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Stephen P. Greb  
Name (Printed or typed)

PO Box 1479  
Address

Nolcomis, FL 34284  
City, State & Zip

941-223-7976  
Daytime Telephone number

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

**Articles of Incorporation for Aquanaautical Adventures, Inc.**

**Article I**

Aquanaautical Adventures, Inc.

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 SEP -6 AM 11:52

**Article II**

Principal Place of Business is 603 Osceola Rd., Suite #2, Nokomis, FL 34275

Mailing address is: PO Box 1479, Venice, FL 34284

**Article III**

The purpose of this corporation is to maintain boats and yachts, teach SCUBA, and charter boats.

**Article IV**

The company is authorized to have 10,000 shares of stock outstanding

**Article V**

The company's officers and titles are as follows:

Stephen P. Greb  
President  
PO Box 1479  
Venice, FL 34284

Stephen P. Greb  
Secretary and Treasurer  
PO Box 1479  
Venice, FL 34284

**Article VI**

Registered Agent is:

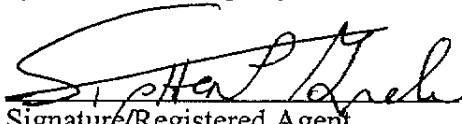
Stephen P. Greb  
603 Osceola Rd., Suite #2, Nokomis, FL 34275  
Venice, FL 34284

**Article VII**


The name and address of the Incorporator is:

Stephen P. Greb  
PO Box 1479  
Venice, FL 34284

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

9-2-05  
Date

  
Signature Incorporator

9-2-05  
Date