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TRANSMITTAL LETTER

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

SUBJECT:	AQUAMARINA BTQ, INC	C	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	final and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	\$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
			Status
	ADDITIONAL COPY REQUIRED		
FROM:	RERNARD KOPET D A Name (Printed or typed)		
	Name (Printed or typed)		
-	20170 PINES BLVD SUITE # 302		
	Address		
	Wordiego		
	PEMBROKE PINES, FL 33029		
•	City, State & Zip		
	(954) 441-0403		

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

Daytime Telephone number

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:

AQUAMARINA BTQ, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

109 N 3rd STREET FERNANDINA BEACH, FL 32034

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PURPOSE OF THE CORPORATION IS SALES

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES PAR VALUE @\$1.00 PER SHARE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

PRESIDENT

KATIA MARNIER

4740 S. OCEAN BLVD. - APT #204

HIGHLAND BEACH, FL 33487

ARTICLE VI REGISTERED AGENT

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

KATIA MARNIER

4740 S. OCEAN BLVD - APT #204

HIGHLAND BEACH, FL 33487

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BERNARD KOPET P.A.

20170 PINES BLVD - SUITE #302

PEMBROKE PINES, FL. 33029

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

Signature/Incorporator

09/01/2005

Date

2005 SEP 2b A 8: 39
SECRETARY OF STATE
AREA A MASSEE, FLORIDA