

PD00000017759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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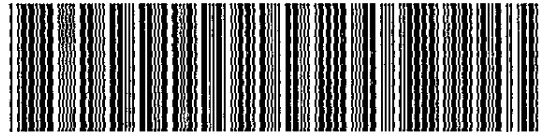
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2006 FEB -3 AM 8:06  
CLERK OF STATE  
TALLAHASSEE FLORIDA

2/8/06

TRANSMITTAL LETTER

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

**FILED**  
2006 FEB -3 AM 8:06  
CLERK OF STATE  
TALLAHASSEE FLORIDA

SUBJECT: KARL NICHOLAS MARINE, 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM: KARL MARULLO

Name (Printed or typed)

5056 42ND ST S

Address

ST PETERSBURG, FL 33711

City, State & Zip

727-409-9525

Daytime Telephone 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:

KARL NICHOLAS MARINE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5056 42ND ST S, ST PETERSBURG, FL 33711

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MARINE REPAIR

**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):

KARL MARULLO, PRESIDENT  
506 42ND ST S, ST PETERSBURG, FL 33711

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

KARL MARULLO  
506 42ND ST S, ST PETERSBURG, FL 33711


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


KARL MARULLO  
506 42ND ST S, ST PETERSBURG, FL 33711

\*\*\*\*\*

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

X   
\_\_\_\_\_  
Signature/Registered Agent

1/20/2006  
\_\_\_\_\_  
Date

X   
\_\_\_\_\_  
Signature/Incorporator

1/20/2006  
\_\_\_\_\_  
Date

FILED

2006 FEB -3 AM 8:06

SECRETARY OF STATE  
TALLAHASSEE FLORIDA