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COVER LETTER

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

SUBJECT: North Florida Matine Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original \$70.00 Filing Fee	ginal and one (1) copy of the article \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	SECRE TALLAH	25 = 12 - 12	
	SEAR Tranor Name ((Printed or typed)			112 MIO: 19	FILEU
	TLH Fla 37	2 3 0 8 State & Zip				
-	(850) 980 - 175 (Celephone number				

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

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Δ	RTICI	ES OF	INCORPO	TRATION

FILED

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

06 JUN 12 AM 10: 19

ARTICLE I

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE. FLORIDA

North Florida Mobil Marine Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4070 SHK BAY DE

Tailahussay 1 F1

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all LAWfull Bussiness

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):

SUAN Tranos

4070 SILL BAY Pr

Tallahusseent 32308

ARTICLE VI REGISTERED AGENT

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

TrAnos Scan

4070 SILK BAY Dr

Tallahise, Fl 32308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SUAN Tranor

4070 SIK BOY DE

Talkhisse 11/2 32308

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