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FILED 6 M 3: 38

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COVER LETTER

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

SUBJECT:	VERITAS 1	NC	
		TE NAME – <u>MUST INCLUDE SUFFIX</u>)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	
FROM:	CRAIL DANIEL DOOLEY Name (Printed or typed)		
	P.O. Box 14	10	
-		Address	
	FORT PIER	CE FL 34954 State & Zip	
	City,	State & Zip	
	(772) 321		
	Daytime Telephone number		

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 26, 2006

CRAIG DANIEL DOOLEY P.O. BOX 1416 FORT PIERCE, FL 34954

SUBJECT: VERITAS INC Ref. Number: W06000024514

We have received your document for VERITAS INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 506A00037196

Suzanne Hawkes Document Specialist New Filing Section

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: SEURIFICATION 3: 38	
The name of the corporation shall be:	
The name of the corporation shall be: VERITAS SALVA GELLANG GESTATE ARTICLE II PRINCIPAL OFFICE	
THE THE STATE OF T	
221 2 3 422 2	
The principal place of business/mailing address is:	
P.O. BOX 14/4	
FT. PIERCE, FL 34954	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
MARINE SALVAGE	
ARTICLE IV SHARES	
The number of shares of stock is:	
ONE	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
CRAIG DOOLEY, PRESIDENT	
Po. Box 1416	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
CRAIG BOOLEY	
1322 US HWY 1	
SEBASTIAN, FC, 32958	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
COALG DOOLEY	
PO BOX 1416	
FOR PIERLE FL 34854	

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 OS M OC Pate Ob M Ob Ob Ob Ob Ob Ob	
Signature/Registered Agent	
43134/00	
Signature/Incorporator Date	

ARTICLES OF INCORPORATION