

P08000011958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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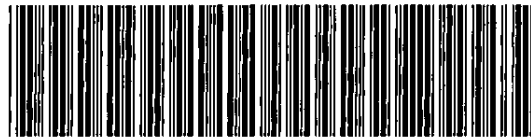
(Business Entity Name)

(Document Number)

Certified Copies 1 . Certificates of Status \_\_\_\_\_

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08 FEB -4 AM 8:47  
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08 FEB -4 AM 8:53  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CG 2-4

## COVER LETTER

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

SUBJECT: AQUASPLASH CONSTRUCTION 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: ANTHONY JOSEPH REGAN  
Name (Printed or typed)

7476 WREN DR  
Address

TALLAHASSEE FL 32310  
City, State & Zip

850-210-2315  
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:

*AQUASPLASH CONSTRUCTION INC.*

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*7476 WREN DR. TALLAHASSEE FL 32310*

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*ANY AND ALL LAWFULL BUINESS.*

### **ARTICLE IV SHARES**

The number of shares of stock is:

*75 SHARES*

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

*ANTHONY J REGAN PRESIDENT*

*JAMES REGAN VICE PRESIDENT*

*JOHN REGAN VICE PRESIDENT*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

17476 WRENDA TALLAHASSEE FL 32316 (ANTHONY REGAN)

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ANTHONY REGAN 17476 WRENDA TALLAHASSEE FL.

\*\*\*\*\*

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

Anthony Regan  
Signature/Registered Agent

2/04/08  
Date

Anthony Regan  
Signature/Incorporator

2/04/08  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA