

908000014893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

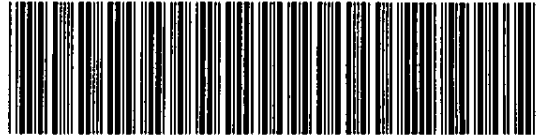
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Handwritten signature/initials

## COVER LETTER

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

**SUBJECT:** SeaWebb, Incorporated

(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:** Michael E Webb

Name (Printed or typed)

POB 150073

Address

Cape Coral, FL 33915

City, State & Zip

239.823.3223

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:

**SeaWebb, Incorporated**

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

4944 Sorrento Ct

Cape Coral, FL 33904

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Yacht & Ship Brokerage / Marine Services**

## **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):

Michael E Webb  
POB 150073  
Cape Coral, FL 33915  
President, CEO.

Barbara J Webb  
POB 150073  
Cape Coral, FL 33915  
Vice President, Secretary, Treasurer

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**ARTICLE VI REGISTERED AGENT**

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

Michael E Webb  
4944 Sorrento Ct  
Cape Coral, FL 33904

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Michael E Webb  
POB 150073  
Cape Coral, FL 33915

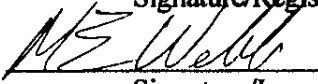
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TALLAHASSEE, FLORIDA

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*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

Feb. 6, 2008

\_\_\_\_\_  
Date

Feb. 6, 2008

\_\_\_\_\_  
Date