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08 MAY -5 AM 8: 03
SECRETARY OF STATE
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COVER LETTER

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

SUBJECT: KAYAK				
	(PROPOSED CORPOR	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00	\$78.75	□ \$78.75	☑ \$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of	
		Status ADDITIONAL COPY REQUIRED		
FROM: THOMAS A ALTIF Name (Printed or typed)				
3 INDIAN RIVER AVENUE Address UNIT 505				
	TITUSVILL	LE FL 32 y, State & Zip	2796	
	321 68 Daytime	39-34-04 Telephone number	<u> </u>	

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:

KAYAKS BY BO, INC.

O8 MAY -5 AM 8: 03 SECRETARY OF STATE FALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

519 GARDEN STREET TITUSVILLE, FLORIDA 32796

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: RENTAL AND SALE OF KAYAKS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): THOMAS A. ALTIF, PRESIDENT LINDA B. ALTIF, SECRETARY

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: THOMAS A. ALTIF
3 INDIAN RIVER AVENUE UNIT 505
TITUSVILLE, FLORIDA 32796

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: THOMAS A. ALTIF
3 INDIAN RIVER AVENUE UNIT 505
TITUSVILLE, FLORIDA 32796