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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 SEP 15 AM 11:05

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9/15/08

COVER LETTER

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

SUBJECT: DOCK LINE BAG, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: MATTHEW R. BOLEN

Name (Printed or typed)

12870 BRYNWOOD PRESERVE LANE

Address

NAPLES, FL 34105

City, State & Zip

239-269-6017

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:

DOCK LINE BAG, INC.

ARTICLE II PRINCIPAL OFFICE

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

3435 ENTERPRISE AVE. #19
NAPLES, FL 34104

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MATTHEW BOLEN
12870 BRYNWOOD PRESERVE LANE
NAPLES, FL 34105

ARTICLE VI REGISTERED AGENT

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

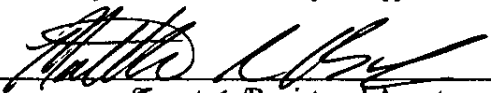
MATTHEW BOLEN
12870 BRYNWOOD PRESERVE LANE
NAPLES, FL 34105

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

MATTHEW BOLEN
12870 BRYNWOOD PRESERVE LANE
NAPLES, FL 34105

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

9/11/08

Date

9/11/08

Date

2008 SEP 15 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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