## P10000043400

(Re	equestor's Name)		
(Ac	idress)	<u> </u>	
(Ác	ldress)		
(Ci	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
		1	

Office Use Only



900181029149

U5/19/10--01016--008 \*\*78.75

FILED

SECRETARY OF STAR

521-10 G

## **COVER LETTER**

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

ILIALIA IBIOI

SUBJECT:	H2 FC	-O INC. TENAME-MUSTINCL		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	-	
	ADDITIONAL COPY REQUIRED			
FROM: H2 FLO ME NICK MORRIS  Name (Printed or typed)  1231 Swyth st  Address				
	Boca Ra	State & Zip	3486	
_	561-50 Daytime T	ou-5530 95 elephone number	<u> 4-304-3927</u>	
E-mail address: (to be used for future annual report notification)				

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

ARTICLES OF INCORPORATION ≧☐ 5	<b>₹</b> π
In compliance with Chapter (07 and/or Chapter (21 E.C. (D., C.))	7 19 E
H2 FLO INC.	₹ U \$
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	•
1231 SW 4. ST	
1231 SW 4th ST  ARTICLE III PURPOSE BOCA RATION, FL 33486 The purpose for which the corneration is presented in	
The purpose for which the corporation is organized is:	
TO FACILITATE LESSONS FOR SURFING, ST PADDLE TSUARDING AND WATER REPONIS The number of shares of stock is:	rand-up sility for
1000 shares .01	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  1231 50 4m 57  Boca Randon, F. 33486  327	ALMON, FL
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	33432
Nick Morris	
BOCA RMON, FL 33486	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  J. NOSS  327 NE 4th AVE	
BOCK RATION, FL 3343Z	:
+++++++++++++++++++++++++++++++++++++++	*****
Having been named as registered agent to accept service of process for the above stated corporal place designated in this certificate, I am familiar with and accept the appointment as registered agree to act in this capacity	
Mark Marres 5-11-10	
Signature/Registered Agent  Date  5-1-10  Date	