

# P/D 0000 47653

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

RECEIVED JUN - 4 2010

FLORIDA PROFIT/NON PROFIT CORPORATION  
PORT & STBD, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION** JUN -4 AM: 45

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

PORT & STBD, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business is:

700 TERRANCE CT  
FORT WALTON BEACH, FLORIDA 32547

The mailing address is:

PO BOX 2906  
FORT WALTON BEACH, FLORIDA 32549

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000 COMMON SHARES PAR VALUE \$0.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)**

The name(s), address(es), and title(s) of the directors and officers is:

DIRECTOR, PRESIDENT  
CHRISTOPHER WARD  
PO BOX 2906  
FORT WALTON BEACH, FLORIDA 32549

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

CHRISTOPHER WARD  
700 TERRANCE CT  
FORT WALTON BEACH, FLORIDA 32547

**ARTICLE VII INCORPORATOR**

The name and street address of the incorporator is:

CHRISTOPHER WARD  
PO BOX 2906  
FORT WALTON BEACH, FLORIDA 32549

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.

  
CHRISTOPHER WARD / Registered Agent

6/4/10  
Date

  
CHRISTOPHER WARD / Incorporator

6/4/10  
Date