

P11000025967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

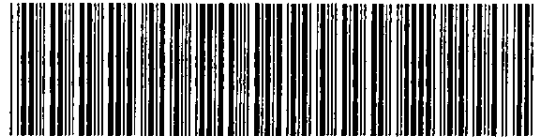
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000197649840

000197649840
03/14/11--01053--004 **78.75

FILED
MAR 14 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 3/16/11

COVER LETTER

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

SUBJECT: Tools for Diving Education, 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 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 R. Ange

Name (Printed or typed)

1180 Sunrise Vista Circle

Address

North Port, FL 34291

City, State & Zip

727-271-8400

Daytime Telephone number

mike@seaduction.com

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

FILED
11 MAR 14 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Tools for Diving Education, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street and mailing address:
1648 Taylor Road, Number 141
Port Orange, FL 32128

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: importation and distribution of sporting goods products.

ARTICLE IV SHARES

The number of shares of stock is: 200,000.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Michael R. Ange, President
1180 Sunrise Vista Circle
North Port, FL 34291

Tracy Grubb, Secretary
1648 Taylor Road, Number 141
Port Orange, FL 32128

William M. Stone, Treasurer
615 Arvern Drive
Altamonte Springs, FL 32701

ARTICLE VI REGISTERED AGENT

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

Michael R. Ange
1180 Sunrise Vista Circle
North Port, FL 34291

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael R. Ange
1180 Sunrise Vista Circle
North Port, FL 34291

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.

Michael A. Gye
Required Signature/Registered Agent

02/04/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Michael A. Gye
Required Signature/Incorporator

02/04/11
Date

FILED
11 MAR 14 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA