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COVER LETTER

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

SUBJECT: Reel Lucky Charters of Key West, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the article	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy Certified Cop & Certificate Status ADDITIONAL COPY REQUIRED
FROM: Grant Laswell	(Printed or typed)
2824 Staples Avenue	ddress
Key West, FL. 33040	State & Zip
305-407-5425 Daytime Te	elephone number
jim.laswell@bluestonecol E-mail address: (to be used	nstruct.com for future annual report notification)

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

· · · · · · · · · · · · · · · · · · ·	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:		
2	2824 Staples Avenue				
Ŀ	Key West FL 33040				
RTICLE III	PURPOSE		∑		
	hich the corporation is organized is:		FC.	To Harry 1	
Fishing Char	ter Business		ELAHASSEE, F	APR 25	
RTICLE IV	SHARES		22 22	SECURITY SEC	
he number of shar	res of stock is:100		ORIO.	ထ္ထ	
DTICI E U	INITIAL OFFICERS AND/OR DIRECT	YORG	A		
	itle: Grant Laswell - President		Title:		
Address:	2824 Staples Avenue	Address:			
	Key West, FL 33040				
Name and T	<u></u>		m'.l	-	
Address:	itle:				
71447055.		/\ddiess.			
Name and Ti	itle:	Name and	Title		
Address:		Address:			
	· · · · · · · · · · · · · · · · · · ·				
DTICLE W	REGISTERED AGENT				
	rida street address (P.O. Box NOT acceptable	e) of the registere	l agent is:		
Name:	Grant Laswell				
Address:	2824 Staples Avenue				
	Key West, FL 33040	***			
RTICLE VII	<u>INCORPORATOR</u>				
ne <u>name and add</u>	<u>lress</u> of the Incorporator is:				
Name:	Grant Laswell				
Address:	2824 Staples Avenue Key West, FL 33040				
	ed as registered agent to accept service of pro			designated in	
is certificate, I an	n fashiliar with and accept the appointment as	registered agent	and agree to act in this capacity		
H			4/22/2011		
7/	Required Signature/Registered Agent	 	Date	:	
U Submit this docu	ment and affirm that the facts stated herein	are true I am a	ware that the false information s	uhmitted in a	
	epartment of State constitutes a third degree fe			MOHULLU III (I	
L	(1)	<u> </u>	, ,		
			4/22/2011		
///	Required Signature/Incorporator		Da	to	