

PI/000063821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

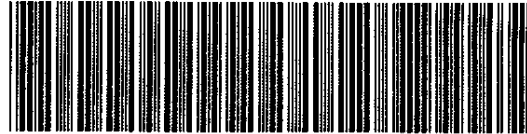
☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



300209833643

07/13/11--01013--001 **78.75

Special Instructions to Filing Officer:

Brant Cochran GAVE

AUTHORIZATION BY PHONE TO

CORRECT Article -I with Name

DATE 7-18-11 AT 7:30 A.M.

DOC. EXAM S. Collins

Office Use Only

2011 JUL 13 PM 2:30
SECRETARY'S OFFICE
TALLAHASSEE, FL 32311

SC
7-18-11

COVER LETTER

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

SUBJECT: Lake Istokpoga Marina , 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: Brant Cochran

Name (Printed or typed)

#119 Marina RV Drive

Address

Lake Placid, FL 33852

City, State & Zip

618-410-8102

Daytime Telephone number

brant@dynamicenv.com

E-mail address: (to be used for future annual report notification)

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

2011 JUL 13 PM 2:30
RECEIVED
TALLAHASSEE, FL 32314

FILED

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: LAKE ISTOKPOGA MARINA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
#155 Marina RV Drive
Lake Placid, FL 33852

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Corporation for a business that does the following; operate a marina/ tackle shop, etc...

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Brant Cochran, President
Address: #119 Marina RV Dr
Lake Placid, FL 33852

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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

Name: Brant Cochran
Address: #119 Marina RV Drive
Lake Placid, FL 33852

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Brant Cochran
Address: #119 Marina RV Drive
Lake Placid, FL 33852

2011 JUL 13 PM 2:30
CLERK OF COURT
STATE OF FLORIDA
LAKE PLACID

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



Required Signature/Registered Agent

7-7-11

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.



Required Signature/Incorporator

7-7-11

Date