

PII 0000070746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

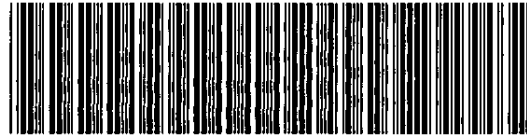
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STA
TALLAHASSEE FLOR

APPROVED
AND
FILED

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COVER LETTER

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

SUBJECT: Shallow Point Charters 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: David N. Beede Jr.

Name (Printed or typed)

3213 West Oakellar Avenue

Address

Tampa, Florida 33611

City, State & Zip

813-758-1947

Daytime Telephone number

david@shallowpointcharters.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)

APPROVED
AND
FILED

ARTICLE I NAME Shallow Point Charters, Inc.
The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE
Principal street address
3213 West Oakellar Avenue
Tampa, Florida 33611

Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
For profit and charity fishing charters. Dolphin, manatee, island hopping and any business
realated to boating and fishing.

ARTICLE IV SHARES
The number of shares of stock is:100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>David N. Beede Jr. President</u>	Name and Title: _____
Address: <u>3213 West Oakellar Avenue</u>	Address: _____
<u>Tampa, Florida 33611</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: David N. Beede Jr.
Address: 3213 West Oakellar Avenue
Tampa, Florida 33611

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: David N. Beede Jr.
Address: 3213 West Oakellar Avenue
Tampa, Florida 33611

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

8/1/2011
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

8/1/2011
Date