

P110000078916

(Requestor's Name)

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(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

6211-44519

Office Use Only



400211291314

08/25/11--01005--004 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 SEP -6 PM 3:55

APPROVED
AND
FILED

1/4

COVER LETTER

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

SUBJECT: **PARADISE REEF FL 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: **Mariana Lamprecht**

Name (Printed or typed)

P.O. Box 10

Address

Cortez, Florida, 34215

City, State & Zip

941792 1000

Daytime Telephone number

mariana@monolextrading.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2011

MARIANA LAMPRECHT
P.O. BOX 10
CORTEZ, FL 34215

SUBJECT: PARADISE REEF FL INC
Ref. Number: W11000044519

We have received your document for PARADISE REEF FL INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please list the name of the corporation in Article I.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 211A00019995

APPROVED
AND
FILED

ARTICLES OF INCORPORATION

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

11 SEP -6 PM 3: 58

ARTICLE I NAME PARADISE REEF SFL INC

The name of the corporation shall be:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

7834 CORTEZ ROAD WEST
BRADENTON
FLORIDA 34210

Mailing address, if different is:

PO BOX 10
CORTEZ
FLORIDA 34215

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO CONDUCT ALL KINDS OF LEGAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | | | |
|-----------------|-------------------------------|-----------------|--|
| Name and Title: | MARIANA LAMPRECHT - PRESIDENT | Name and Title: | |
| Address: | 7700 CORTEZ ROAD WEST | Address: | |
| | BRADENTON | | |
| | FLORIDA FL 34210 | | |

| | | | |
|-----------------|---------------------------------|-----------------|--|
| Name and Title: | STEPHEN E WOJULEWSKI - DIRECTOR | Name and Title: | |
| Address: | 3916 ROYAL PALM DRIVE | Address: | |
| | BRADENTON | | |
| | FLORIDA 34210 | | |

| | | | |
|-----------------|--|-----------------|--|
| 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:

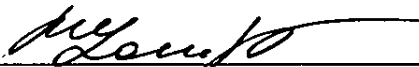
Name: MARIANA LAMPRECHT
Address: 7700 CORTEZ ROAD WEST
BRADENTON FL 34210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIANA LAMPRECHT
Address: 7700 CORTEZ ROAD WEST
BRADENTON FL 34210

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

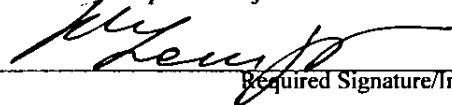


Required Signature/Registered Agent

23 AUGUST 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

23 AUGUST 2011

Date