

P11000084970

(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

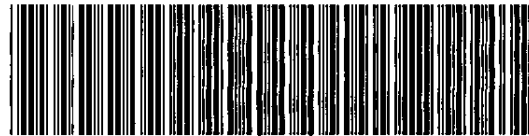
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Marron Weeks gave  
authorization to correct  
Articles III and IV.

Office Use Only

2545-  
W11000047752



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09/14/11--01008--022 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2011 SEP 27 PM 4:37

9/28/11

## COVER LETTER

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

**SUBJECT:** American Marine Construction 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:** Roberta C. Weeks

Name (Printed or typed)

1203 SE 4th ave

Address

Crystal River, Florida 34429

City, State & Zip

352-601-0818

Daytime Telephone number

americamarine1@gmail.com

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

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DIVISION OF CORPORATIONS  
2011 SEP 27 PM 4:37

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 15, 2011

ROBERTA C. WEEKS  
1203 SE 4TH AVENUE  
CRYSTAL RIVER, FL 34429

SUBJECT: AMERICAN MARINE CONSTRUCTION INC.  
Ref. Number: W11000047752

We have received your document for AMERICAN MARINE CONSTRUCTION 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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

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) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 911A00021414

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DIVISION OF CORPORATIONS  
2011 SEP 27 PM 4:37

**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: American Marine Contractors Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1203 SE 4th Ave  
Crystal River, FL 34429

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Perform Marine Construction

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Roberta C. Weeks

Address: 1203 SE 4th Ave  
Crystal River, FL 34429

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: Roberta C Weeks

Address: 1203 SE 4th Ave  
Crystal River, FL 34429

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Roberta C Weeks

Address: 1203 SE 4th Ave  
Crystal River, FL 34429

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

Roberta C Weeks  
Required Signature/Registered Agent

9/20/11  
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.

Roberta C Weeks  
Required Signature/Incorporator

9/20/11  
Date

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