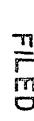


(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PłCK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Doe	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	





11/08/11--01015--002 **70.00





COVER LETTER

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

SUBJECT: ATLANTIC BAYS & ST	ORAGE, INC.	
(PROPOSED CORPORA) Enclosed are an original and one (1) copy of the artic		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: ATLANTIC BAYS & S	(C.M	
PORT DRANGE, FL City, S	duress	•
Daytime Te	lephone number	· · · · · · · · · · · · · · · · · · ·
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)

RTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailin	g address, if different is:
<u> </u>	16 CHARLES STREET 10 RT ORANGE, FL 32129		
<u>. F</u>	OKT OKANOB, EL 32124		
TICLE III P	TOPOCE		
	ch the corporation is organized is:		
pp	o. gamzou io.		
			TALLAHASSEE. FLORE
			PSE Z
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TICLE IV S	HARES		7 %
	s of stock is: 4,000		(5,7g)
	•		ELO.
Name A Tit	NITIAL OFFICERS AND/OR DIR :: TU-SYN D'AD PALIO , PLE	ECTORS	* *** ****
Address:	416 CHARLES STREET	Address:	6.5
, maritali	PORT ORANGE, FL 321	z9	24
			7
Name and Tiel.	EPIK RACCEPTU VI	A SEC. Nome and Tister	
Address:	ERIK RAFFERTY VI 416 CHARLES STREET PORT ORANGE, FL 32	Address:	
	PORT ORANGE, FL 32	129	
Name and Title	3.	Name and Title:	
Address:	,	Address:	
	<u>EGISTERED AGENT</u>		
	la street address (P.O. Box NOT accep	table) of the registered agent is:	
Name: Address:	JUSTIN D'ADDARIO 416 CHARLES STREE		
Augress:	PORT ORANGE FL 321		
			
	VCORPORATOR ss of the Incorporator is:		
name and addre Name:			
Address:	JUSTIN D'ADDARIO		
	416 CHARLES STREET	170	
	-		
	as registered agent to accept service of		
	amiliar with and accept the appointmen		uer ar nas cupucny
TUEL	u Addacio		/1-3-11
TIN D'ADDA	u Addor 10 Required Signature/Registered Ag	ent	Date
hmit this docume	ent and affirm that the facts stated her		
	Required Signature/Incorporato	•	100, 2104