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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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W11-61059

COVER LETTER

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

SUBJECT: YACHT OWNERS CHOICE CORP

(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: AGUSTIN COMAS

Name (Printed or typed)

10651 NW 39TH STREET

Address

CORAL SPRINGS, FL 33065

City, State & Zip

954-818-9610

Daytime Telephone number

AUGIEC123@AOL.COM

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

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

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TALLAHASSEE, FLORIDA

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:

~~YACHT OWNERS CHOICE CORP~~
ELITE, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

10651 NW 39 STREET
CORAL SPRINGS FL 33065

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MARINE/BOAT REPAIR

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: AGUSTIN COMAS

Address: 10651 NW 39 STREET
CORAL SPRINGS FL 33065
PRESIDENT

Name and Title: OLGA COMAS

Address: 10651 NW 39 STREET
CORAL SPRINGS FL 33065
VICE PRESIDENT

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: OLGA COMAS

Address: 10651 NW 39 STREET
CORAL SPRINGS FL 33065

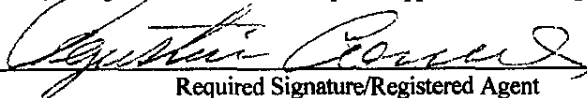
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: AGUSTIN COMAS

Address: 10651 NW 39 STREET
CORAL SPRINGS FL 33065

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

11/29/2011

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

11/29/2011

Date

* To be effective Jan. 1st 2012

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