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(Requestor's Name)			
(Address)			
(Addiess)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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Office Use Only



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SECRETARY OF STATE

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COVER LETTER

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

SUBJECT: KATT Marine Consulting Inc.				
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:			
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
	<u></u>			
FROM: Matthew P. Taylor Name	(Printed or typed)			
11005 5th Street East	Address			
Treasure Island, FL 337	706 State & Zip			
(727) 244-2099 Daytime To	elephone number			
kristy@savageyachts.col	m I 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)

ARTICLE I The name of the corp	IAME oration shall be:	g Inc.	
ADTICLE IL I	PRINCIPAL OFFICE		
AKTICLE II F	Principal street address		Mailing addragg if different in
11	005 5th Street East		Mailing address, if different is:
	easure Island, FL 33706		
115	asure Island, FL 33700		
_	•		
ARTICLE III P			TALLAHASSEE, FLORI
The purpose for whi	ch the corporation is organized is:		
Vessel consult	ing		
			E 2 12
			11 0 C
			mg = -
ADTICLE III. C	UADEC		至3. 元
ARTICLE IV S The number of shares		•	92 3
The number of shares	OI STOCK IS: 10		Em .
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECTOR	s	7
	::Matthew P. Taylor - President		Title:
Address:	11005 5th Street East	Address:	
	Treasure Island, FL 33706	-	
		_	
	:Kristine D. Taylor - Secretary/Treas	Name and	Title:
Address:	11005 5th Street East	_ Address:	
	Treasure Island, FL 33706	_	
		-	
Name and Title		Niama and	Tide.
Address:	·		
Address:		_ Address:	· ·
		-	
		-	·
ARTICLE VI R	EGISTERED AGENT		
The name and Florid	la street address (P.O. Box NOT acceptable) of	the registere	d agent is:
Name:	Kristine D. Taylor	_	
Address:	11005 5th Street East	-	
	Treasure Island, FL 33706	-	
ADMICI PIET	ACCORDOD A TOP		
	VCORPORATOR ss of the Incorporator is:		
Name:			
Address:	Matthew P Taylor	-	
Addiess.	11005 5th Street East Treasure Island, FL 33706	-	
	Treasure Island, FL 33700	-	
Having been named	as registered agent to accept service of process	for the abo	ve stated corporation at the place designated in
	familiar with and accept the appointment as regi		
	" "	•	
			4-20-12
	Required Signature/Registered Agent		Date
	Acquired Signature Registered Agent		Date
I submit this docume	ent and affirm that the facts stated herein are	true. I am a	tware that the false information submitted in a
	artment of State constitutes a thind degree felony		
	27	•	·/ /
	1011//		4/2//12
	Required Signature/Incorporator		