P/2000/04000

F 84.		
(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
. (Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECHETARY OF STATE
TALLAHASSEF, FI ORIO

x 12/20/12

EFFECTIVE DATE 01/01/13

COVER LETTER

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

SUBJECT: ALL	BOATSTAR, INC		
	(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	ILBERTO SANT		
		(Printed or typed)	
16	60 NW 67 AVE		
	A	Address	
· • • • • • • • • • • • • • • • • • • •	11 AM FL 33126		

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

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

City, State & Zip

Daytime Telephone number

ALLBOATSTAR@GMAIL.COM

786-355-6150

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

Principal street address Mailing address, if different is: MANUL PL 33128 MANUL ADDRESS ADDRESS AND DIRECTORS Name and Title: Address: MANUL ADDRESS AND ADDRESS A	<u> ARTICLE II</u>	PRINCIPAL OFFICE	34 11	11 10 1100
INTICLE II PURPOSE he purpose for which the corporation is organized is: PROFIT EFFECTIVE DATE: 1/1/2013 INTICLE IV SHARES he number of shares of stock is: 100 SHARES INTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: GLBERTO SMYLOS, PRESIDENT Address: 160 NW ET AVE Address: 4Address: 6BO NW ET AVE Address: 6BO NW OF AVE Address: 6BO NW OF AVE ADDRESS AND OR ADDRESS ADDRESS ADDRESS AND OR ADDRESS AND OR ADDRESS AND OR ADDRESS ADDRE		Principal <u>street</u> address	Mailing ac	ddress, if different is:
RTICLE III PURPOSE he purpose for which the corporation is organized is: PROFIT EFFECTIVE DATE: 1/1/2013 RTICLE IV SHARES he number of shares of stock is: 100 SHARES RITICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: MERITO SANTOS, PRESIDENT Address: MAMIFEL 33126 Name and Title: Name and Title: Address: Address				
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RTICLE V SHARES In number of shares of stock is: 100 SHARES RITICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: GLBERTO SANTOS, PRESIDENT Address: 100 NW 57 AVE MIAMI FL 33126 Name and Title: Address: Mame and Title: Address: Ad	PTICLE III	DIRPOSE		
RTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: GLBERTO SANTOS, PRESIDENT			OFIT	
he number of shares of stock is: 100 SHARES Name and Title: GLEERTO SANTOS, PRESIDENT Name and Title: Address: HO NAME Address: Addres	EFFECTIVE (DATE: 1/1/2013		
Name and Title: Subservo Savios. PRESIDENT Name and Title: Address: MAMIFL 33126 Name and Title: Address: Addre		•		
Name and Title: GLBERTO SANTOS, PRESIDENT Name and Title: Address: MAMIFL 33126 Name and Title: Address: Address:	RTICLE IV he number of sh	SHARES nares of stock is: 100 SHARES		
Name and Title: Address: 160 NW 67 AVE			ECTORS	
Address: Mame and Title:	Name and	Title: GILBERTO SANTOS, PRESIDENT	Name and Title:	
Name and Title: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: GILBERTO SANTOS Address: MAMM. FL 33126 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: GILBERTO SANTOS Address: GILBERTO SANTOS Address: Name: GILBERTO SANTOS Address: Name: GILBERTO SANTOS Address: Name: GILBERTO SANTOS Address: Refulred Signature for the appointment as registered agent and agree to act in this capacity Rectured Signature/Registered Agent Restured Signature/Registered Agent To submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted to comment to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		160 NW 67 AVE	Address:	
Name and Title: Address: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: SILBERTO SANTOS Address: 160 NW 67 AVE MIAMI, FL 33126 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Address: GILBERTO SANTOS Address: Name: Address: GILBERTO SANTOS Address: Name: Address: GILBERTO SANTOS Address: FIGURE OF THE PROPERTY OF THE PROPERTY OF THE ADDRESS OF THE ADOVE STATE OF THE				
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Name and Title: Address: Address: Address: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: GILBERTO SANTOS		Title:	Address:	
Address: Address: Address:				
Address: RTICLE VI REGISTERED AGENT the name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 160 NW 67 AVE MIAMI, FL 33126 RTICLE VII INCORPORATOR the name and address of the Incorporator is: Name: GILBERTO SANTOS Address: 160 NW 67 AVE MIAMI FL 33126 Itaving been named as registered agent to accept service of process for the above stated corporation at the place designate his certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Refulted Signature/Registered Agent Submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted occument to the Department of Suite original action as provided for in s.817.155, F.S.	Name and	Title	Name and Title	
RETICLE VI REGISTERED AGENT the name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: GILBERTO SANTOS				
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: GILBERTO SANTOS 160 NW 67 AVE MIAMI, FL 33126 MARTICLE VII INCORPORATOR MIAMI, FL 33126 MARTICLE VII INCORPORATOR MIAMI, FL 33126 MIAMI FL 33126				
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