P13000022497

(Requestor's Name)					
(Address)					
(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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COVER LETTER

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

SUBJECT: Hi T	ide Marine Cons	struction, Inc.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d 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 REQUI	
		e (Printed or typed)	
24	469 SE Dixie Hw	7	
S	tuart, FI 34997	Address	
	-	, State & Zip	
<u>7</u>	72-349-0727		
	•	Telephone number	
lin	denmarine@yahoo		
	E-mail address: (to be use	ed 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)

FILED

name of the corpora	ME Hi Tide Marine Co		13 TAK PH o
TICLE II PRI	NCIPAL OFFICE Principal street address		Mailing address Englisher SEE. FLOR
69 SW Dixi	- 		TAMINE WOULDS ELLINAMISSIE, FLOR
uart, Fl 349			
_	the corporation is organized is: Marine Corporation Corporation	Construction (docks, seawalls and boat lifts
	W. C.		
· · · · · · · · · · · · · · · · · · ·			
TICLE IV SHA	ARES 1000		
TICLE IV SHA number of shares of	stock is:		
TICLE V INIT	TIAL OFFICERS AND/OR DIRECTOR		
TICLE V INIT			Maurice Petz (VP)
TICLE V INIT	TIAL OFFICERS AND/OR DIRECTOR		Maurice Petz (VP) 2689 SW Trailside Path
TICLE V INT	rial officers and/or director Linda Petz (President)	Name and Title.	
Name and Title Address	Linda Petz (President) 2689 SW Trailside Path Stuart, Fl 34997	_ Name and Title Address:	2689 SW Trailside Path Stuart, Fl 34997
Name and Title Address	Linda Petz (President) 2689 SW Trailside Path Stuart, FI 34997	_ Name and Title: _ Address: Name and Title:	2689 SW Trailside Path Stuart, Fl 34997
Name and Title Address Name and Title	Linda Petz (President) 2689 SW Trailside Path Stuart, Fl 34997	_ Name and Title: _ Address: Name and Title:	2689 SW Trailside Path Stuart, Fl 34997
Name and Title Address Name and Title: Address	Linda Petz (President) 2689 SW Trailside Path Stuart, Fl 34997	_ Name and Title: _ Address: _ Name and Title: _ Address: _	2689 SW Trailside Path Stuart, Fl 34997
Name and Title Address Name and Title: Address	Linda Petz (President) 2689 SW Trailside Path Stuart, FI 34997	_ Name and Title: _ Address: _ Name and Title: _ Address: _	2689 SW Trailside Path Stuart, Fl 34997
Name and Title Address Name and Title: Address	Linda Petz (President) 2689 SW Trailside Path Stuart, Fl 34997	Name and Title: Address: Name and Title: Address:	2689 SW Trailside Path Stuart, Fl 34997

FILED

Name and	i Title:	Name and Title:	1 7 7 7 7 1 1 1 1
Address		Address:	SECRETARY OF STATE
•		<u> </u>	
		.	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Fl</u>	orida street address (P.O. Box NOT acceptable) of	f the registered agent	is:
Name:	Maurice Petz	<u>.</u>	
Address:	2689 SW Trailside Path	_	
	Stuart, FI 34997	_	
ARTICLE VII The name and ad	INCORPORATOR dress of the Incorporator is:		
Name:	Maurice Petz		
Address:	2689 SW Trailside Path	_	
١	Stuart, Fl 34997	_	
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg		
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon		
	lle Ptz		03/06/2013
	Required Signature/Incorporator		Date