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	(Requestor's Name)				
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PICK-U	P WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
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3 MAY 28 PN 4: 2
ECRETARY OF STATE

COVER LETTER

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

SUBJECT: F A MARINE SERVICES CORPORATION (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 \$78.75 \$87.50 \$87.50 \$Filing Fee & Filing Fee & Filing Fee & Filing Fee & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:	LUIS FERRER		
	Name (Printed or typed)		
	5240 SW 128 AV		
-	Address		
	MIAMI FLORIDA 33185		
_	City, State & Zip		
	786 6038590		
_	Daytime Telephone number		
	LUIS FERRER TRANSMOMAIL COM		

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

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

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

The name of the corpora	tion shall be: FA MARINE SER	VICES CORPC	DRATION
5240 SW 128 MIAMI FLORI	Principal <u>street</u> address	Mailing a	address, if different is:
IVIIAIVII I LOINI	DA 33103		
ARTICLE III PUR The purpose for which t	POSE he corporation is organized is:	RADES AND LE	GAL BUSINESS
		- 1 1 1 1 1 1	
			TA SE
ARTICLE V INT	TAL OFFICERS AND/OR DIRECTOR	<u></u>	FILED WAY 28 PN 4- 22 MAY 28 PN 4- 22 ALLAHASSEE, FLORIDA
Name and Titl Address	LUIS FERRER (PRES) 5240 SW 128AV	Name and Title: Address:	
Address	MIAMI FLORIDA 33185	Address:	
Name and Title:		Name and Title:	
Address		Address:	
		Name and Title:	
Address		Addragas	

Name and Title:		Name and Title:	FILEU
Addres			13 NAY 28 PM 4: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE VI The name and F	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of the registered agent is:	· · · · · · · · · · · · · · · · · · ·
Name:	LUIS FERRER		
Address:	5240 SW 128 AV		
	MIAMI FLORIDA 33185		
ARTICLE VII The name and a	INCORPORATOR address of the Incorporator is:		
Name:	LUIS FERRER		
Address:	5240 SW 128 AV		
	MIAMI FLORIDA		
Having been na this certificate, l	med as registered agent to accept service of proc am familiar with and accept the appointment as	ess for the above stated cor registered agent and agree	poration at the place designated in to act in this capacity
			05/24/2013
	Required Signature/Registered Agent		Date
I submit this do document to the	cument and affirm that the facts stated herein of Department of State constitutes a third degree fe	ire true. I am aware that th lony as provided for in s.81	ne false information submitted in a 7.155, F.S.
			05/24/2013
	Required Signature/Incorporator		Date