

P130000065422

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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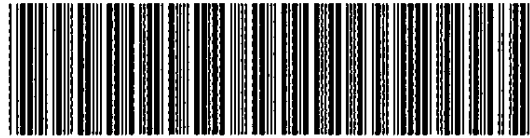
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

1/4

COVER LETTER

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

SUBJECT: AQUA 1 REALTY INC
(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: MICHAEL D. MORAN
Name (Printed or typed)
1188 CEYLON DR
Address
GULF BREEZE, FL 32563
City, State & Zip
856-221-8024
Daytime Telephone number
MDMORAN2@MCHSI.COM
E-mail address: (to be used 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 NAME

The name of the corporation shall be:

AQUA 1 REALTY INC

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ARTICLE II PRINCIPAL OFFICE

Principal street address

1188 CEYLON DR

GULF BREEZE, FL 32563

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MAILING ADDRESS, IF DIFFERENT IS:
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

PRIMARYLY ACTING AS A FLORIDA REAL ESTATE
BROKER

ARTICLE IV SHARES

The number of shares of stock is:

2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL D. MORAN, PRES

Address

1188 CEYLON DR

GULF BREEZE, FL 32563

Name and Title:

DIANE C. MORAN VP/SEC

Address:

1188 CEYLON DR

GULF BREEZE, FL 32563

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title: _____ Name and Title: **FILED**
Address: _____ Address: **13 AUG -5 PM 1:47**

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MICHAEL D. MORAN
Address: 1188 CEYLON DR
GULF BREEZE, FL 32563

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MICHAEL D. MORAN
Address: 1188 CEYLON DR
GULF BREEZE, FL 32563

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

Michael D. Moran 31 JUL 13
Required Signature/Registered Agent 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.

Michael D. Moran 31 JUL 13
Required Signature/Incorporator Date