

P13000067269

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003955
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Mary

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
USA POWERBOAT TOURS INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

64760
Resubmitted
8/14

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 15 2013

A. DUNLAP

H1300017642

COVER LETTER

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

SUBJECT: USA POWERBOAT TOURS 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: Scott Locke
Name (Printed or typed)

1521 ALTON RD 53
Address

MIAMI BEACH FL 33139
City, State & Zip

305 487 1700
Daytime Telephone number

USA POWERBOATTOURS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

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

H13000177642

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: USA POWERBOAT TOURS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1521 ALTON RD 53

MIAMI BEACH FL 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Power Boat Tours

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SCOTT LOCKE CEO Name and Title: _____

Address: 1521 ALTON RD 53 Address: _____

MIAMI BEACH FL
33139

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

OK to change
stock shares.
MURRY
Empire.
8/15/2000

13 AUG -9 PM 2:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: SCOTT LOCKER
Address: 1521 ALTON RD S3
MIAMI BEACH FL 33139

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: SCOTT LOCKER
Address: 1521 ALTON RD S3
MIAMI BEACH FL 33139

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

Required Signature/Registered Agent 8-9-13
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.

Required Signature/Incorporator 8-9-13
Date

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