

P13000092260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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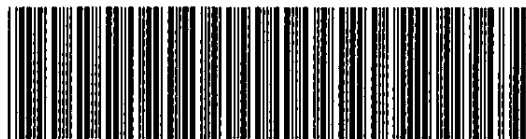
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 NOV 12 PM 1:14

11/13/13

COVER LETTER

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

SUBJECT: AQUA ACTION, 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: MOUSTAFA ABOUTALEB
Name (Printed or typed)

3327 E. Paula Lane

Address

Inverness, FL 34453

City, State & Zip

(352) 476-4382

Daytime Telephone number

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

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

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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 ACTION, INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

3327 E. PAULA LANE

INVERNESS, FL 34453

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Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for operation of a business and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MOUSTAFA ABOUTALEB

Address: 3327 E. PAULA LANE

INVERNESS, FL 34453

TITLE: P, VP, SEC., T.

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(conti.)

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: MOUSTAFA ABOUTALEB
Address: 3327 E. PAULA LANE
INVERNESS, FL 34453

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RHONDA PORTWOOD
Address: 101 N. OSCEOLA AVE.
INVERNESS, FL 34450

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

Moustafa Aboutaleb
Required Signature/Registered Agent

11/4/13
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.

Rhonda Portwood
Required Signature/Incorporator

11/4/13
Date

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