P14000098152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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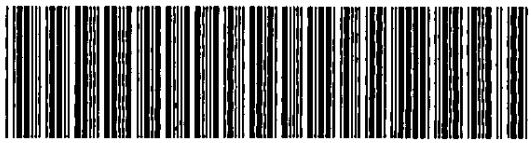

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/8/14

# COVER LETTER

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

**SUBJECT:** THAI TANIC 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 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: PRAPAPUN KYSER
Name (Printed or typed)

98 POINT COMFORT RD
Address

MARY ESTHER FL 32569
City, State & Zip

850-460-9357
Daytime Telephone number

rascalkyser55@hotmail.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

**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: THAI TANIC CORPORATION

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TALLAHASSEE, FLORIDA

***ARTICLE II PRINCIPAL OFFICE***

Principal street address

107 HARBOR BLVD
DESTIN FL 32541

Mailing address, if different is:

***ARTICLE III PURPOSE***
The purpose for which the corporation is organized is: FOR PROFIT

***ARTICLE IV SHARES***
The number of shares of stock is: 100

***ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS***

Name and Title: PRAPAPUN KYSER
Address: 98 POINT COMFORT RD
MARY ESTHER FL 32569

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: PRAPAPUN KYSER

Address: 98 POINT COMFORT RD

MARY ESTHER FL 32569

***ARTICLE VII INCORPORATOR***

The **name and address** of the Incorporator is:

Name: PRAPAPUN KYSER

Address: 98 POINT COMFORT RD

MARY ESTHER FL 32569

***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***

Prapapun Kyser
Required Signature/Registered Agent

11-28-2014
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.***

Prapapun Kyser
Required Signature/Incorporator

11-28-2014
Date

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TALLAHASSEE, FLORIDA