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Division of Corporations

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## FLORIDA PROFIT/NON PROFIT CORPORATION STANO MARINE INC

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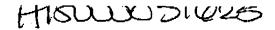
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## STATE OF FLORIDA ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED 15 FEB 27 AM 9: 18

## STANO MARINE INC

SECRETARY OF STATE FALLAHASSEE, FLORIDA

The undersigned, acting as incorporators of a corporation under the Florida General Corporation Act, adopt the following Articles of Incorporation:

FIRST:

The name of the Corporation is: .

STANO MARINE INC

SECOND:

The period of its duration is perpetual.

THIRD:

The purpose or purposes for which the corporation is organized are:

To engage in the transaction of any or all lawful business for which

Corporations may be incorporated under the provisions of the Florida General

Corporation Act.

FOURTH:

The aggregate number of shares which the corporation shall have authority to

issue is:

One Thousand Shares (1,000) at \$1,00 par value,

FIFTH:

The name and street address of the initial registered agent of the

Corporation shall be:

<u>ARON STANO</u>

3287 NW 47<sup>TH</sup> AVENUE

COCONUT CREEK, FL 33063

The street address of the principal office of the Corporation shall be:

3287 NW 47TH AVENUE

COCONUT CREEK, FL 33063

SIXTH:

The number of Directors constituting the initial Board of Directors of the

Corporation is 1, and the names and addresses of the persons whom are to serve as Directors until the first annual meeting of Shareholders or until their

successors are elected and shall qualify are:

ARON STANO

3287 NW 47TH AVENUE

COCONUT CREEK, FL 33063

Prepared by: Christine Pendleton, CPA Southeast Accounting & Tax Services, Inc.

713 East Atlantic Blvd., Pompano Beach, FL 33060

954-941-7328

The name and address of each incorporator is:

ARON STANO 3287 NW 47<sup>TH</sup> AVENUE COCONUT CREEK, FL 33063

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

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

State of Florida:
County of Broward:

The foregoing instrument was acknowledged before me this, \_27 \_ day of

FEBRUARY

Personally Known OR Produced Identification

Type of Identification Produced FLA DRNERS LICENTE

Prepared by: Christine Pendleton, CPA Southeast Accounting & Tax Services, Inc. 713 East Atlantic Blvd., Pompano Beach, FL 33060 954-941-7328