

P15000024421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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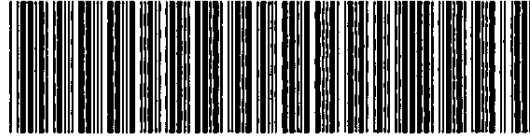
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/13/15

COVER LETTER

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

SUBJECT: Blue Ocean Trading and Supply Corp
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Edgar M. Hyde

Name (Printed or typed)

4117 Amber Ridge Lane

Address

Valrico, FL 33594

City, State & Zip

813-260-9626

Daytime Telephone number

emhyde2004@gmail.com

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: Blue Ocean Trading and Supply Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

235 W. Brandon Blvd - Suite 641
Brandon, FL 33511

Mailing address, if different is:

816 E. Orange Ave
Tampa, FL 33613

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TAMPA, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Trading, purchasing and sales of marine products
and other products to the marine, industrial and commercial markets.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Edgar M. Hyde - Pres

Name and Title: _____

Address 4117 Amber Rideg Lane
Valrico, FL 33594

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ 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: Julie Harte
Address: 9424 Balm River view Rd
Rivernew, Fl 33569

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Edgar M Hyde
Address: 4117 Amber Ridge Ln.
Valrico, Fl 33594

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

Julie Harte
Required Signature/Registered Agent

2/26/2014
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.

Edgar M Hyde
Required Signature/Incorporator

2/26/2014
Date

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TALLAHASSEE, FLORIDA