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COVER LETTER

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

SUBJECT: LIBERTY YACK	HTS USA	CORP.		
(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)		
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status		
	ADDITIONAL CO	PY REQUIRED		
FROM: FRANCIS P. PERRUCCI Name (Printed or typed)				
1848 HARBOR PLACE				
Naples FL, 34104 City, State & Zip				
239 370 50 Daytime Te	096 elephone number			
E-mail address: (to be used for future annual report notification)				

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)

ICLE II PRINCIPAL OFFICE		
Principal street addr		s, if different is:
48 HARBOR Pla	ce	
Aples FL.		
34104		
,		
CLE III PURPOSE urpose for which the corporation is organized.	anized is:	
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AT /YACHT MA	sunfacturing and rep	AIR
	/	
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CLE IV SHARES umber of shares of stock is: OOC)	
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CLE V INITIAL OFFICERS A Name and Title: FRANCIS	AND/OR DIRECTORS P. VERRUCCI Name and Title: PRESIA	lent
CLE V INITIAL OFFICERS A Name and Title: FRANCIS	AND/OR DIRECTORS	lent.
nmber of shares of stock is: OOC CLE V INITIAL OFFICERS A Name and Title: FRANCIS Address 1848 HA	AND/OR DIRECTORS P. VERRUCCI Name and Title: PRESIDE ORDOR Place Address:	lent
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Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acc	
Name: FRANCIS P. PER	
Address: 1848 HARbor	Place
Naples FL	34104
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:)
Name: FRANCIS P. FE Address: 1848 HARbore	RRUCCI
Naples Fl	34104
Having been named as registered agent to accept service this certificate, I am familiar with and accept the appoints	of process for the above stated corporation at the place designated in
Junas Pat	erruci 4-2-2015
Required Signature/Registered	Agent Date
I submit this document and affirm that the facts stated h document to the Department of State constitutes a third d	herein are true. I am aware that the false information submitted in a tgree felony as provided for in s.817.155, F.S.
Diance P. Lo	Music 4-2-2015
Required Signature/Incorpora	itor Date