P15000037776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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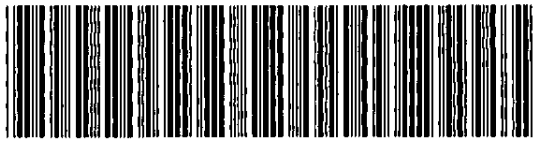

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15 APR 28 AM 11:19
DIVISION OF CORPORATIONS

15 APR 28 AM 11:28

APPROVED AND FILED

4/28/15

# COVER LETTER

15 APR 28 AM 11:28

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

SUBJECT: Capital City Boats 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: Richard Bowman
Name (Printed or typed)

2810 Sharer Rd.
Address

Tallahassee Fl. 32312
City, State & Zip

850-567-2628
Daytime Telephone number

Not Yet.
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)

15 APR 28 AM 11:28

***ARTICLE I NAME***
The name of the corporation shall be: Capital City Boats Inc

***ARTICLE II PRINCIPAL OFFICE***
Principal street address

2810 Sharer rd.
Tallahassee, FL 32312

Mailing address, if different is:

591 Scotland Rd.
Havana, FL.
32333

***ARTICLE III PURPOSE***
The purpose for which the corporation is organized is: Boat Sales, Any and all Lawful business.

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

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

Name and Title: Richard bowman President
Address 2810 Sharer rd
Tallahassee, FL 32312

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

(conti.)

15 APR 28 AM 11:28

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: Richard Bowman

Address: 2810 Shaver rd
Tallahassee, FL 32312

***ARTICLE VII INCORPORATOR***

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

Name: Richard Bowman

Address: 591 Scotland Rd.
Havana FL. 32333

*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*

_____ Apr 28, 15
Required Signature/Registered Agent 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.*

_____ Apr 28, 15
Required Signature/Incorporator Date