

P15000071640

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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EFFECTIVE DATE

9-1-15

2015 AUG 24 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

AUG 31 2015

T. BROWN

COVER LETTER

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

SUBJECT: ON-SITE MARINE & MACHINERY SERVICE, 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: Greg Attanasio

Name (Printed or typed)

1014 Coldstream Ct.

Address

Tarpon Springs, FL 34689

City, State & Zip

(201) 267-5194

Daytime Telephone number

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

NOTE: Please provide the original and one copy of the articles.

EFFECTIVE DATE

9-1-15

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: ON-SITE MARINE & MACHINERY SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1014 Coldstream Ct

Tarpon Springs, Fl 34689

ARTICLE III PURPOSE

The corporation is organized for the purpose of transacting any or all
The purpose for which the corporation is organized is:
lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes as now exists, or may after
be amended.

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Greg Attanasio, President

Name and Title:

Address 1014 Coldstream Ct.

Address:

Tarpon Springs, Fl 34689

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

FILED
2015 AUG 24 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Greg Attanasio
Address: 1014 Coldstream Ct
Tarpon Springs, FL 34689

ARTICLE VII INCORPORATOR

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

Name: Greg Attanasio
Address: 1014 Coldstream Ct.
Tarpon Springs, FL 34689

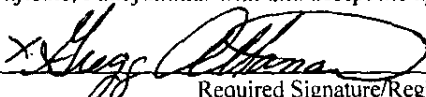
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: September 1, 2015. (OPTIONAL)

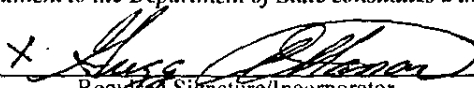
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X  8-20-15
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.

X  8-20-15
Required Signature/Incorporator Date