

From:

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11/13/2015 1:12

#576 P.001/003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800)221-2972
Fax Number : (888)692-9256

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Ocean UAS, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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Corporate Filing Menu

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15 NOV 13 PM 5:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 NOV 13 AM 5:00

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From:

11/13/2015 12:15

#576 P.002/003

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: Ocean UAS, Inc

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

11550 Aviation Blvd, Suite 1
West Palm Beach, FL 33412

Mailing address, if different is:

11550 Aviation Blvd, Suite 1
West Palm Beach, FL 33412

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: David Harmon/President
Address: 11550 Aviation Blvd, Suite 1
West Palm Beach, FL 33412

Name and Title: _____
Address: _____

Name and Title: Andrew McAllister/Vice President
Address: 11550 Aviation Blvd, Suite 1
West Palm Beach, FL 33412

Name and Title: _____
Address: _____

Name and Title: Gillian Harmon/Chief Financial Officer
Address: 11550 Aviation Blvd, Suite 1
West Palm Beach, FL 33412

Name and Title: _____
Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

From:

11/13/2015 12:15 #576 P.003/003

(cont.)

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:

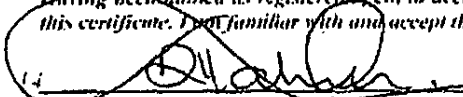
Name: David Harmon
Address: 11550 Aviation Blvd, Suite 1
West Palm Beach, FL 33412

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

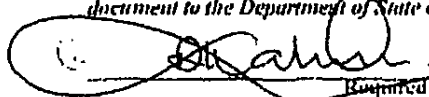
Name: David Harmon
Address: 11550 Aviation Blvd, Suite 1
West Palm Beach, FL 33412

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

11-14-15
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.


Required Signature-Incorporator

11-14-15
Date