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(Business Entity Name)

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16 MAR 17 AM 7:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1/11

COVER LETTER

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

SUBJECT: SHORESIDE MANAGEMENT, 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: BERNELL C. WARD

Name (Printed or typed)

681 E 181ST STREET, SUITE A

Address

BRONX, NY 10457

City, State & Zip

718-367-6111

Daytime Telephone number

BERNELL.WARD@GMAIL.COM

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)

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ARTICLE I NAME

The name of the corporation shall be: SHORESIDE MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different from principal office address, SECRETARY OF STATE
FLORIDA

7001 NW 20TH COURT

FORT LAUDERDALE, FL

33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: MANAGEMENT OF MOTOR VESSELS

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOEL AMBROSE, PRESIDENT

Name and Title: _____

Address 7001 NW 20TH COURT

Address: _____

FORT LAUDERDALE, FL 33313

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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Name and Title: _____ Name and Title: 16 MAR 17 AM 7:36
Address: _____ Address: SECRETARY OF STATE

_____ TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: JOEL AMBROSE
Address: 7001 NW 20TH COURT
FORT LAUDERDALE, FL 33313

ARTICLE VII INCORPORATOR

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

Name: BERNELL C. WARD
Address: 681 E. 181ST STREET #A
BRONX, NY 10457

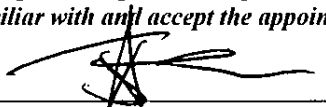
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

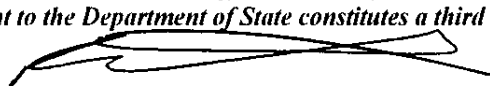


Required Signature/Registered Agent

3/9/16

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

3/9/16

Date