P600034195

(Requestor's Name)			
(Ac	ldress)		
(Address)			
(Ci	ty/State/Zip/Phone	e #)	
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PICK-UP	☐ WAIT	MAIL	
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70.			
(Bi	ısiness Entity Nar	ne)	
(Do	ocument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:	•	
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APR 1 9 2016
T. SCOTT

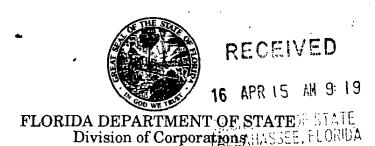


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SEGRETARY OF STATE DIVISION OF CORPORATIONS



March 30, 2016

DIEGO A ROJAS 435 W CYPRESS COVE CIRCLE DAVIE, FL 33325

SUBJECT: AKAI MARINE, INC Ref. Number: W16000023482

We have received your document for AKAI MARINE, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 116A00006511

COVER LETTER

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

SUBJECT:	A Kai Mai	VIAC, INC.	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	_	
\$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 CO	
FROM:		Printed or typed) Ovess Cove	
	Davie, F	1 33325 State & Zip	<u></u>
		224-1083 elephone number	•
	E-mail address; to be used	Akai mavin I for future annual report i	e a yahoo, com

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)

he name of the corporati	ion shall be: A Kai'M	arine,	Inc
	IPAL OFFICE Principal street address	***************************************	Mailing address, if different is:
RTICLE III PURPO he purpose for which the Paintin	SE e corporation is organized is:	terior	Yacht Finishing
			SECRETARY DIVISION OF CE
RTICLE IV SHARE e number of shares of s			OL S HW
Name and Title: Address	Diego A Rojas 435 W. Cypress Cove (Davie, F1 33325 President	~ .	Bonnie M. Rojas 435 W. Cypress Cove Circ Davie, Fl 33325 Vice President
Name and Title:_Address		_ Address:	
-			

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: Diego Rojas	
Address: 435 W. Cypress Cove	Circle
Davie, Fl 33325	
,	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Diego Roias	
Address: 437 W Cypress Cover	Circle
Davie 1 23205	
$-DWH_{1}+1-35525$	
ARTICLE VIII EFFECTIVE DATE:	17.
Effective date, if other than the date of filing: 20 (If an effective date is listed, the date must be specific and cannot	
days after the filing.)	se more chair tive submeds days prior of 50 submeds
Note: If the date inserted in this block does not meet the applicable s	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 cortificate, I am familiar with and accept the appointment as reg	istered agent and agree to act in this capacity
V //100 (Solon	3-17-16
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are t	
document to the Department of State constitutes a third degree felony	as provided for in \$.817.155, F.S.
1 6 lugo Kones	3-17-16
Required/Signature/Incorporator	Date