

P 16000064693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

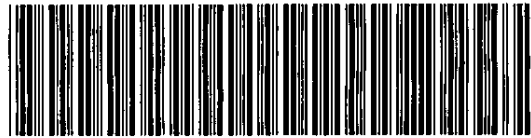
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400288620494

08/03/16--01016--003 **78.75

FILED
16 AUG -5 PM 1:20

RECEIVED
16 AUG -3 AM 10:52
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

8/8/16



1000 Ponce de Leon Blvd. Suite: 105
Coral Gables, FL 33134
Phone: 305-444-4994
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Ocean Summer Corp
(CORPORATE NAME) (DOCUMENT #)
2. _____
(CORPORATE NAME) (DOCUMENT #)
3. _____
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

☒ Pick up time: _____

☒ Certified Copy ☐ Certificate Of Status

New Filings	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2016

EXPRESS CORPORATE FILING SERVICES

SUBJECT: OCEAN SUMMER CORP
Ref. Number: W16000053578

FILED
16 AUG -5 PM 1:20
CORPORATE FILING SECTION
TALLAHASSEE, FLORIDA

We have received your document for OCEAN SUMMER CORP 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 registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 016A00016295

RECEIVED
16 AUG -5 AM 11:10
CORPORATE FILING SECTION
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME OCEAN SUMMER CORP
The name of the corporation shall be: _____

16 AUG -5 PM 1:20

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

123 SE 3rd AVE

Same

STE: 216

MIAMI, FL 33131

ARTICLE III PURPOSE Any and all lawful business
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES Shares: 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Summertime Resources Corp. (P/S)

Name and Title: _____

Address 123 SE 3rd AVE

Address: _____

STE: 216

MIAMI, FL 33131

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

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: Express Corporate Filing Service, Inc.
Address: 1000 Ponce De Leon Blvd Ste: 105
Coral Gables, FL 33134

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CORPORATE
FILING
DIVISION
TALLAHASSEE, FL 32309

ARTICLE VII INCORPORATOR

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

Name: Summertime Resources Corp.
Address: 123 SE 3rd AVE STE: 216
MIAMI, FL 33131

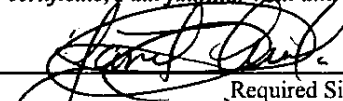
ARTICLE VIII EFFECTIVE DATE:

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

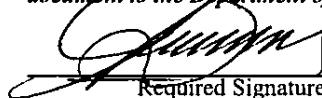


Required Signature/Registered Agent

8/2/16

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

8/2/16

Date