P17000006564

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(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:				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2017

RICHARD TATE 1358 SCOTTSDALE RD. W. PALM BCH., FL 33417

SUBJECT: 1ST LIGHT FISHING GUIDE SERVICE INC.

Ref. Number: W17000001446

We have received your document for 1ST LIGHT FISHING GUIDE SERVICE INC. and your check(s) totaling \$70.00. 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.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 917A00000421

COVER LETTER

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

SUBJECT: \SI	LIGHT FISHING G	UIDE SELVICE	CORP.
, , ,	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fec, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	RICHARD TATE	e (Printed or typed)	
	1358 Sc	OTK) ALERI) Address	
	WEST DALM DEAC City	H FL 33411 , State & Zip	7
	561-358-550 Daytime T	e / Telephone number	
	RTFISHHEAL E-mail address: (to be use	AOL . COM d for future annual report	notification)

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

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

The name of the corpora	tion shall be: 15T LIGHT F	ISHING GUIDE SE	EVICE ING	
ARTICLE II PRINC 1358 SCOTIS!	Principal street address	Mailing add	Mailing address, if different is:	
WEST PALM	BEACH FL 33417			
ARTICLE III PURPO The purpose for which t	<u>OSE</u> he corporation is organized is: \(\int \subseteq \)	41NG GUIDE		
			17 Sin	
			AR JAH 22	
ARTICLE IV SHAR. The number of shares of	ES stock is:/000 Authorized Common sum	ales "	AN 8: 36	
	LOFFICERS AND/OR DIRECTORS RICHARD TASE / PRES.	Name and Title:		
Address	1358 SCOTISDALE RD WEST PALM BEACH FR	Address:		
	33417			
Name and Title	:			
Address		Address:		
				
Name and Title		Name and Title:		
Address		Address:		

Name and Title:	Name and Title:	
Address	Address:	
		67-
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Bo		
Name: KICHARO TA	TE	
Address: <u>1358 Scotts04</u>	1 LE RD	
Address: 1358 SCOTISDE WEST PALM BE	4CH FL 33417	TO JA
		JAM 20 AM SMANRI DI AHANSEE L
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:		
Name: RICHARO TAT Address: 1358 SCOTTSO WEST PALM BE	k	8: 36 STATE LORIDZ
Address: 1358 Sc01750	ALK RO	> 21
WEST PALM BE	4CH FC 33417	
ARTICLE VIII EFFECTIVE DATE:		
Effective date, if other than the date of filing: _(If an effective date is listed, the date must b filling.)	e specific and cannot be more than five da	NAL) ays prior or 90 days after the
Note: If the date inserted in this block does not the document's effective date on the Departme		ments, this date will not be listed as
Having been named as registered agent to acc this certificate, I am familiar with and accept t	cept service of process for the above stated c he appointment as registered agent and agre	orporation at the place designated in the to act in this capacity
1-6/1/14		1/2/17
Required Signature/	Registered Agent	Date
I submit this document and affirm that the fo	acts stated herein are true. I am aware that	the false information submitted in a
document to the Department of State constitut	es a third degree felony as provided for in s.8	217.155, F.Š.
Dichert 1		1/2/17
Required Signature/Incorporator		Date