

PI70000 78462

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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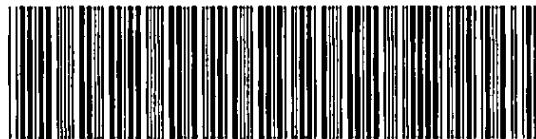
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/28/17--01002--016 **78.75

FILED
17 SEP 28 AM 11:00
U.S. DEPT. OF JUSTICE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

17 SEP 28 AM 11:00

RECEIVED
TALLAHASSEE, FLORIDA

August 29, 2017

SCOTT BOOHER
78 KINDRED BLVD
PORT CHARLOTTE, FL 33954

SUBJECT: MANGROVE COAST BOATS INC.
Ref. Number: W17000070779

We have received your document for MANGROVE COAST BOATS 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 effective date is not acceptable since it is not within five working days of the date of receipt.

Please return 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.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 617A00017747

D
11:32
CORPORATIONS
SERVICES

REC
17 SEP 28
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: MANGROVE COAST BOATS 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: SCOTT BOOHER

Name (Printed or typed)

78 KINDRED STREET

Address

PORT CHARLOTTE, FL 33954

City, State & Zip

941-276-6031

Daytime Telephone number

PCCINC2@EMBARQMAIL.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)

ARTICLE I NAME

The name of the corporation shall be: MANGROVE COAST BOATS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

67 SUNDIET STREET

PORT CHARLOTTE, FL 33954

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONDUCT BUSINESS IN THE MAKING OF BOATS.
AND OTHER MARINE EQUIPMENT AND SUPPLIES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SCOTT BOOHER-PRESIDENT

Name and Title: ROBERT BOOHER-Vice President

Address 78 KINDRED BLVD

Address: 67 SUNDIET STREET

PORT CHARLOTTE, FL 33954

PORT CHARLOTTE, FL 33954

Name and Title: SCOTT BOOHER-SECRETARY

Name and Title: _____

Address 78 KINDRED BLVD

Address: _____

PORT CHARLOTTE, FL 33954

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: SCOTT BOOHER
Address: 78 KINDRED BLVD
PORT CHARLOTTE, FL 33954

FILED
17 SEP 28 AM 11:00
CLERK OF COURT
HALL COUNTY, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: SCOTT BOOHER
Address: 78 KINDRED BLVD
PORT CHARLOTTE, FL 33954

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 days prior or 90 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

Scott Booher 9-26-17
Required Signature/Registered Agent 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.

Scott Booher 9-26-17
Required Signature/Incorporator Date