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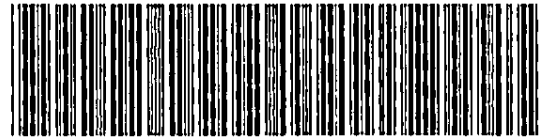
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18 JAN 22 PM 3:17

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COVER LETTER

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

SUBJECT: Sea Shell Adventures, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: William J. Sweeney

Name (Printed or typed)

P. O. Box 2927

Address

Key West, FL 33045

City, State & Zip

305-731-0052

Daytime Telephone number

bs3057310052@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)

ARTICLE I NAME

The name of the corporation shall be: Sea Shell Adventures, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

7009 Shrimp Road

Key West, FL 33040

Mailing address, if different is:

P. O. Box 2927

Key West, FL 33045

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To conduct any business lawful under Florida Statutes.

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PALM BEACH, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William J. Sweeney, President

Name and Title: _____

Address P. O. Box 2927

Address: _____

Key West, FL 33045

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: Paul S. Mills, C.P.A. _____

Address: 1541 Fifth Street _____

Key West, FL 33040 _____

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William J. Sweeney _____

Address: P. O. Box 2927 _____

Key West, FL 33045 _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: January 10, 2018 _____ (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

Paul S. Mills CPA

Required Signature/Registered Agent

January 5, 2018

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.

William J. Sweeney

Required Signature/Incorporator

January 5, 2018

Date

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