

P18000010079

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

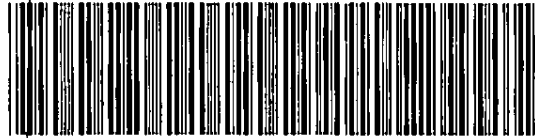
Certified Copies _____ Certificates of Status _____

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JAN 31 2018



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01/29/18--01027--021 **72.75

FILED
18 JAN 29 PM 12:55
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SUNRISE ANGLER 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: SCOTT BOOHER
Name (Printed or typed)
78 KINDRED BLVD
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: SUNRISE ANGLER INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

78 KINDRED BLVD

PORT CHARLOTTE, FL 33954

Mailing address, if different is:

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SCOTT BOOHER-PRESIDENT

Address 78 KINDRED BLVD
PORT CHARLOTTE, FL 33954

Name and Title: ROBERT BOOHER-Vice President

Address: 67 SUNDIET STREET
PORT CHARLOTTE, FL 33954

Name and Title: SCOTT BOOHER-SECRETARY

Address 78 KINDRED BLVD
PORT CHARLOTTE, FL 33954

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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18 JAN 29 PM 12:55
CLERK OF CIRCUIT COURT
HALL COUNTY, FLORIDA

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 _____

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: SCOTT BOOHER _____

Address: 78 KINDRED BLVD _____

PORT CHARLOTTE, FL 33954 _____

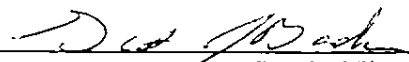
ARTICLE VIII EFFECTIVE DATE:

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

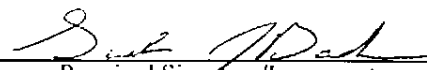


Required Signature/Registered Agent

1-25-18

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

1-25-18

Date