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AQUAPRESERVEINC@GMAIL.COM

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FLORIDA PROFIT/NON PROFIT CORPORATION AQUAPRESERVE INC

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

AQUAPRESERVE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9890 BAYSHORE ROAD N FT MYERS, FLORIDA 33917

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

STARK SULLEN 9890 BAYSHORE ROAD N FT MYERS, FLORIDA 33917

Prepared By:
Bruce B. Hubbard
238 W. Jericho Turnpike
Huntington Sta., NY 11746
1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

STARK SULLEN-9890 BAYSHORE ROAD, N FT MYERS, FL 33917-PRESIDENT/DIRECTOR AGAPITO G GONZALEZ-22141 PEARL STREET, ALVA, FLORIDA 33920-SECRETARY/DIRECTOR

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

STARK SULLEN-9890 BAYSHORE ROAD, N FT MYERS, FL 33917 AGAPITO G GONZALEZ-22141 PEARL STREET, ALVA, FLORIDA 33920

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22ND day of MARCH 20 18

STARK SULLEN

Signature

AGAPITO G GONZALEZ

SIGNATURE

1. The name of the corporation is: **AQUAPRESERVE INC**

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

2. The name and address of the rep	gistered agent and office is:
	STARK SULLEN
	Name
	9890 BAYSHORE ROAD
	(P.O. Box or Mail Drop Box NOT Acceptable)
	N FT MYERS, FLORIDA 33917
	(City / State / Zip)
corporation at the place design agent and agree to act in this co	ed agent and to accept service of process for the above stated ated in this certificate, I hereby accept the appointment as registered apacity. I further agree to comply with the provisions of all the statute plete performance of my duties, and am familiar with and accept the gistered agent.
A ne	3/22/2018
STARK SULLEN SIGNATURE	(Date)