

TO: 11/12/2011 06:17:38 PM From: 11/12/2011 06:17:38 PM Date: 11/12/2011 Time: 9:05 AM 01/02
11/12/2011
P18000092870

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000325167 3)))



H180003251673ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : 12018000011
Phone : (844)386-0178
Fax Number : (214)317-4754

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
BAHAMATATA CHARTERS, INC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

((H18000325167 3)))

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:

BAHAMATATA CHARTERS, INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5521 N UNIVERSITY DR #203
CORAL SPRINGS FL 33067

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DOING BUSINESS IN STATE OF FL

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

CLIFFORD HAMMOND
5521 N UNIVERSITY DR Ste 203
CORAL SPRINGS FL 33067

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

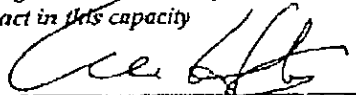
CLIFFORD HAMMOND
5521 N UNIVERSITY DR Ste 203
CORAL SPRINGS FL 33067

ARTICLE VII INCORPORATOR

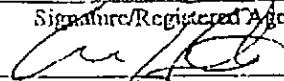
The name and address of the incorporator is:

CLIFFORD HAMMOND
5521 N UNIVERSITY DR Ste 203
CORAL SPRINGS FL 33067

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



Signature/Registered Agent



Signature/Incorporator

10/30/18

Date

10/30/18

Date

((H18000325167 3)))