

P18000/00/47

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2018 DEC -7 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FL

VALHALLA MARINE INC
18 MADRID LANE
PORT ST LUCIE, FL 34952
PHONE (954) 371-3460
captmikeparr@hotmail.com

December 2, 2018

DEPARTMENT OF STATE
NEW FILING SECTION
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

New Filing Section, Division of Corporations,

Please be advised that I will not reinstate the old Doc # P16000084954, under Valhalla Marine, Inc. and I am requesting you file for a new profit corporation using the same name Valhalla Marine, Inc.

Kindly find the attached new application for a new corporation and state document # using the same name of Valhalla Marine, Inc.

Please accept the attached articles of incorporation along with the \$70.00 filing fee.

If you have any questions please feel free to call me.

Sincerely,



Michael Parr

President

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: VALHALLA MARINE, 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: MICHAEL PARR
Name (Printed or typed)

18 MADRID LANE
Address

PORT ST LUCIE, FL 34952
City, State & Zip

954-371-3460
Daytime Telephone number

captmikeparr@hotmail.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: VALHALLA MARINE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
18 MADRID LANE
PORT ST LUCIE, FL 34952

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL PARR, President

Address: 18 MADRID LANE
PORT ST LUCIE, FL 34952

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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TALLAHASSEE, FL

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: _____
MICHAEL PARR

Address: _____
18 MADRID LANE

PORT ST LUCIE, FL 34952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____
MICHAEL PARR

Address: _____
18 MADRID LANE

PORT ST LUCIE, FL 34952

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TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE: 12/10/2018

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

12/03/2018

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.

Required Signature/Incorporator

12/03/2018

Date