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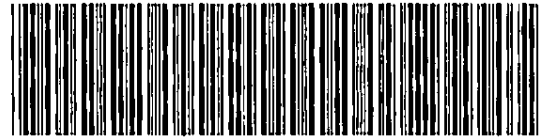
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MAR 20 11:24
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 5, 2019

MATTHEW MOORE
165 SE VIA VISCONTI
PORT ST LUCIE, FL 34952

SUBJECT: ISLAND BREEZE, INC.
Ref. Number: W19000013761

We have received your document for ISLAND BREEZE, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED. ✓

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. ✓
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page
Regulatory Specialist ii

Letter Number: 519A00004432



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2019 MAR -4 PM 2:07

February 12, 2019

MATTHEW MOORE
165 SE VIA VISCONTI
PORT ST LUCIE, FL 34952

SUBJECT: ISLAND BREEZE, INC.
Ref. Number: W19000013761

We have received your document for ISLAND BREEZE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

PLEASE INCLUDE NEW NAME IN ARTICLE 1.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page
Regulatory Specialist II

Letter Number: 819A00002993

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: Island Breeze TROPICAL BLAST, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
165 SE Via Visconti
Port St. Lucie, FL 34952

Mailing address, if different is:
165 SE Via Visconti
Port St. Lucie, FL 34952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To apply for a liquor license
in the state of Florida for a walk-up beach
stand serving alcoholic beverages - (tiki-hut style) wine
patrons walk-up, order a beverage & leave.
This establishment will be selling frozen margaritas,
and daiquiris + ^{craft} beer

ARTICLE IV SHARES

The number of shares of stock is: 1.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matthew Moore Name and Title: President CEO

Address: 165 SE Via Visconti Address: _____
Port St. Lucie, FL 34952

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

19 MAR 20 AM 11:24
CLERK

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: MATTHEW MOORE
Address: 105 SE Via Visconti
Port St. Lucie, FL 34952

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MATTHEW MOORE
Address: 105 SE Via Visconti
Port St. Lucie, FL 34952

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

Matthew Moore
Required Signature/Registered Agent

1/19/2019
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.

Matthew Moore
Required Signature/Incorporator

1/18/2019
Date