

P19000043923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

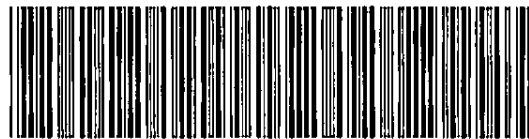
Special Instructions to Filing Officer:

Office Use Only

W19000027875

MAY 30 2019

T. C. C. F.



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03/13/19--01017--007 **78.75

FILED

2019 MAY 29 AM 10:39



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 27, 2019

HAROLD NISBETT
7262 HICKORY BRANCE CIRCLE
ORLANDO, FL 32818

SUBJECT: NISBETT CARIBBEAN SHIPPING
Ref. Number: W19000027875

We have received your document for NISBETT CARIBBEAN SHIPPING and your check(s) totaling \$78.75. 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 person designated as incorporator in the document and the person signing as incorporator must be the same.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 019A00005619

COVER LETTER

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

SUBJECT: NISBETT CARIBBEAN SHIPPING 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: HAROLD NISBETT

Name (Printed or typed)
7262 HICKORY BRANCE CIRCLE

Address
ORLANDO, FL 32818

City, State & Zip
305-725-3578
~~305-725-3578~~
305 725 3578

Daytime Telephone number
nisbettg@bellsouth.net

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

NISBETT CARIBBEAN SHIPPING *Inc*
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7262 HICKORY BRANCH CIR

ORLANDO, FL 32818

ARTICLE III PURPOSE

PROVIDE SHIPPING SERVICES TO CARIBBEAN COUNTRIES
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

1000 HA
The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

HAROLD NISBETT PRESIDENT
Name and Title: _____

Name and Title: _____

7262 HICKORY BRANCH CIRCLE
Address: _____
ORLANDO, FL 32818

Address: _____

GWEN NISBETT VICE PRESIDENT
Name and Title: _____

Name and Title: _____

7262 HICKORY BRANCH CIRCLE
Address: _____
ORLANDO, FL 32818

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED
2018 MAY 29 AM 10:25
CLERK OF DISTRICT COURT
JACKSONVILLE, 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: HAROLD NISBETT
Address: 7262 HICKORY BRANCH CIRCLE
ORLANDO, FL 32818

ARTICLE VII INCORPORATOR

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

Name: Harold Nisbett
Address: 6640 Edgewater Drive Suite D
Orlando, FL 32810

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

3/10/2019
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.


Required Signature/Incorporator

3/10/2019
Date

Harold Nisbett