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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number (305)675-5944

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

Ema1l	Address	• •

FLORIDA PROFIT/NON PROFIT CORPORATION MY OCEAN INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the

The name of the corporation is:
Try Ocean Inc.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
- Grawn Bridge Dr.
Delray Beach FL: 33446
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Silvia Reynals Maya (P)
ARTICLE V INITIAL REGISTERED ACRES
The name and Florida street address (PO Box not acceptable) of the registered agents:
16769 Crown Wildow N
DelRAY BEACH FI 334416
DelRAY PREACH, FL 33446
DelRay Preach, Fl. 33446 Silvia Reynals Maya
ARTICLEVI INCORPORATOR: The name and add
ARTICLEVI INCORPORATOR: The name and add
Silvia Reynals Maya

Required Signatures:

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

Registered Agent

07/01/19

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.

Incompositor

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