P19000053365

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.

(((H19000207763 3)))

H19000207763ABC2

19 JUL -8 AM 8:39

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 : DIVERSIFIED CORPORATE SERVICES INT'L, INC.
Account Number : I20090000024
Phone : (518)229-8228
Fax Number : (302)371-9850

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

Email Address: Jerry@diversifiedcorp.com

FLORIDA PROFIT/NON PROFIT CORPORATION
SALTLIFE5 INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$78.75

J DENNIS

JUL 09 2019

Electronic Filing Menu Corporate Filing Menu Help

(((H19000207763 3)))
19 JUL -8 AM 8:39

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: SALTLIFE5 INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
71 MYRTLE BROOK BEND	SAME
PONTE VEDRA, FL 32081	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY ALLOWED U
CHAPTER 607 OF THE FLORIDA STATUTES AND/OR CHAPTER 621, F.S. (PROFIT).

ARTICLE IV SHARES
The number of shares of stock is: 200 NO PAR VALUE SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ERIK J. DREWES	Name and Title: PRESIDENT/DIRECTOR
Address: 71 MYRTLE BROOK BEND	Address:
PONTE VEDRA, FL 32081	
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

(((H19000207763 3)))
19 JUL -8 AM 8:39

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: ERIK J. DREWES

Address: 71 MYRTLE BROOK BEND

PONTE VEDRA, FL 32081

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: ERIK J. DREWES

Address: 71 MYRTLE BROOK BEND

PONTE VEDRA, FL 32081

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

/s/ ERIK J. DREWES — 07/08/2019

Required Signature/Registered Agent — 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.

/s/ ERIK J. DREWES — 07/08/2019

Required Signature/Incorporator — Date