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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES,

Account Number : 075350000353 Phone : (800)221-2972 Fax Number : (718)889-7420

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

Email	Address:		 _	

## FLORIDA PROFIT/NON PROFIT CORPORATION BillyBoats, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

CLEU PRII	NCIPAL OFFICE		
CIAL THE	Principal street address	Mailing address, if o	different is:
0 Reflections Bl	vd, Apt 203	10240 Reflections Blvd, Ap	t 203
ise, Fl 33351		Sunrise, F1 33351	
CLE III PUR purpose for which	the corporation is organized is:		<u> </u>
	BOAT RE	VT465	
<del></del>			
CLE IV SHA	RES 100		
umber of shares of the control of th	of stock is:		
umber of shares of the control of th	of stock is:  IAL OFFICERS AND/OR DIRECTORS  William J. Carroll - Director	Name and Title:	
umber of shares of the control of th	of stock is:		
umber of shares of CLE V INIT Name and Ti	of stock is:  IAL OFFICERS AND/OR DIRECTORS  William J. Carroll - Director	Name and Title:	
umber of shares of CLE V INIT Name and Ti	Milliam J. Carroll - Director  10240 Reflections Blvd, Apt 203	Name and Title:Address:	
umber of shares of CLE V INIT Name and Ti Address	Milliam J. Carroll - Director  10240 Reflections Blvd, Apt 203  Sunrise, Fl 33351	Name and Title:  Address:	
umber of shares of CLE V INIT Name and Ti Address	Milliam J. Carroll - Director  10240 Reflections Blvd, Apt 203  Sunrise, Fl 33351	Name and Title:  Address:  Name and Title:	
CLE V INIT  Name and Ti  Address	Milliam J. Carroll - Director  10240 Reflections Blvd, Apt 203  Sunrise, Fl 33351	Name and Title:  Address:  Name and Title:	
CLE V INIT  Name and Ti  Address	Milliam J. Carroll - Director  10240 Reflections Blvd, Apt 203  Sunrise, Fl 33351	Name and Title:  Address:  Name and Title:	
CLE V INIT  Name and Ti  Address	Milliam J. Carroll - Director  10240 Reflections Blvd, Apt 203  Sunrise, Fl 33351	Name and Title:  Address:  Name and Title:	
CLE V INIT  Name and Ti  Address  Name and Titl  Address	Milliam J. Carroll - Director  10240 Reflections Blvd, Apt 203  Sunrise, Fl 33351	Name and Title:  Address:  Name and Title:  Address:	
CLE V INIT  Name and Ti  Address  Name and Titl  Address	AL OFFICERS AND OR DIRECTORS William J. Carroll - Director 10240 Reflections Blvd, Apt 203 Sunrise, Fl 33351	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	

Name and	Title:	Name and Title:
Address		
RTICLE VI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable)	of the registered agent is:
	William J. Carroll	_
Name:	10240 Reflections Blvd, Apt 203	_
Address:	Sunrise, FI 33351	
		_
ARTICLE VII	INCORPORATOR	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	WIlliam I. Carroll	_
Address:	10240 Reflections Blvd, Apt 203	<del></del>
	Sunrise, Fl 33351	_
ARTICLE VIII	EFFECTIVE DATE:  f other than the date of filing:	. (OPTIONAL)
(If an effective filing.)	date is listed, the date must be specific and car	anot be more than five days prior or 90 days after the
	te inserted in this block does not meet the applica	ble statutory filing requirements, this date will not be listed
the document's	effective date on the Department of State's recor	ds.
er_ 1-	- have served as makened assets to accept service of pr	ocess for the above stated corporation as the place designated in as resistened agent and agree 0 act in this capacity
alide of	y buen usunal as registered agent to accept service of pr relifican. I am familier with and accept the appairment:	11/05/2019
	Required Signature/Registered Agent	Date
i ent	// a see a s	a are true. I can enouse that the false information submitted in a
docus	his tiff document and affirm that the just state in-	11/05/2019
	Senstane Incorporator	Date
	\	
	l V	