

P200000029622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

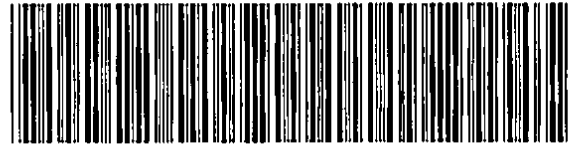
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STATE OF FLORIDA
TALLAHASSEE, FL

12/19 10:10AM Don H. and Mary H. H. H.

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:

Bleu Tropics Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

10 Harbor Blvd.
Suite 60 E
Destin FL 32541

Mailing address, if different is:

1630 Kauai Ct.
Gulf Breeze FL
32563

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail, all legal
& lawful business

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Deborah A. Baumann President

Address:

1630 Kauai Ct.
Gulf Breeze FL
32563

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

Name and Title: _____

Address _____

Name and Title: _____

Address _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Deborah A. Baumann

Address: 1630 Kauai Ct
Gulf Breeze FL 32563

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Deborah A. Baumann

Address: 1630 Kauai Ct
Gulf Breeze FL 32563

ARTICLE VIII EFFECTIVE DATE

I receive date, if other than the date of filing, 11/21/19. (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 space does not meet the applicable provisions of the law, the date will be the date of the document's effective date on the Department of State 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.

Deborah A. Baumann

Required Signature/Registered Agent

11/21/19

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.

Deborah A. Baumann

Required Signature/Incorporator

11/21/19

Date

SECRETARY OF STATE
TALLAHASSEE, FL

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