P20000029622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

12/19 10:10AM

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 60E
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 of 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 Bauman President
Address: 1630 Kauai ct.
Gulf Breeze FL.
32563

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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TALLAHASSEE, FL

Name and Title: _____

Address _____

_____

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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:

Enter 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 block does not meet the applicable statutory requirements, the Department of State will not be able to file 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.

Deborah Ann 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 Ann Baumann
Required Signature/Incorporator

Date 11/21/19

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