

P21000035620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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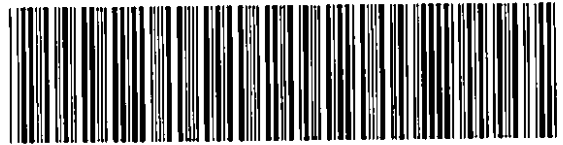
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: All Inclusive Adventures inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Sean Blackford
Name (Printed or typed)

8014 Front Beach Rd
Address

Panama City Beach FL 32407
City, State & Zip

850 708 2429
Daytime Telephone number

C/eve/pcb@Gmail.Com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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: All Inclusive Adventures Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8014 Front Beach Rd
PCB FL 32407

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All Business Purpose

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sean K Blackford Name and Title: 1

Address: 5462 Sunset Ave Address: _____

34% Panama City Beach
President FL, 32407

Name and Title: Richard C Blackford Name and Title: _____

Address: 510 Indiana Ave Address: _____

33% Lynn Haven 32444

Vice President

Name and Title: Charles Nay Name and Title: _____

Address: 6721 Harbour Blvd Address: _____

33% PCB, FL
Treasurer 32407

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: Sean Blackford

Address: 5402 Sunset Ave
Panama City Beach FL 32407

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sean Blackford

Address: 5402 Sunset Ave
Panama City Beach FL 32407

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 4-21-2021 (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

Required Signature/Registered Agent

4-21-2021
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.

Required Signature/Incorporator

4-21-2021
Date