

5/25/22, 9:51

Division of Corporations

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Florida Department of State  
Division of Corporations  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
SPRING GARDEN MARINE INC

Certificate of Status	0
Certified Copy	1
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CORPORATIONS  
COMMERCIAL  
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D. O'KEEFE

MAY 26 2022

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: SPRING GARDEN MARINE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

700 NW 7TH AVE
MIAMI FL 33136

Mailing address, if different is:

700 NW 7TH AVE
MIAMI FL 33136

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 10.000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LAURA ROTALDE / President, Director

Address: 700 NW 7TH AVE
MIAMI, FL 33136

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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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: LAURA ROTALDE  
 Address: 700 NW 7TH AVE  
MIAMI FL 33136

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LAURA ROTALDE  
 Address: 700 NW 7TH AVE  
MIAMI FL 33136

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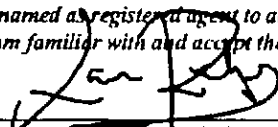
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 05/24/2022 (OPTIONAL)

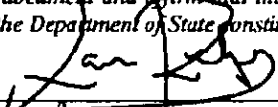
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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*

 05/24/2022  
 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.*

 05/24/2022  
 Required Signature/Incorporator Date