

Oct. 4. 2022 9:02AM

No. 2705 P. 1

10/4/22, 9:03 AM

P22000076493

Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000339825 3)))



H220003398253ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : GARY, DYTRYCH & RYAN, P.A.
Account Number : I19990000255
Phone : (561)844-3700
Fax Number : (561)844-2388

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

Email Address: jay@carpentercos.net

FLORIDA PROFIT/NON PROFIT CORPORATION
BLB Marine Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2022 OCT -4 AM 10:20

03/01

Electronic Filing Menu

Corporate Filing Menu

Help

2022 OCT -4 PM 2:12
STATE
10/4/2022

ED

(H22000339825 3)

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

ARTICLE I NAMEThe name of the corporation shall be: BLB Marine Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address17174 Bay St.Jupiter, FL 33477

Mailing address, if different is:

17174 Bay St.Jupiter, FL 33477**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any and all lawful business. The corporation shall elect to be taxed as a "small business corporation" (S corporation) for income tax purposes.**ARTICLE IV SHARES**The number of shares of stock is: 1,000**ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Jay J. Carpenter, Pres., Sec., Dir.

Name and Title: _____

Address

17174 Bay St.

Address: _____

Jupiter, FL 33477Name and Title: Bonnie B. Carpenter, VP, Treas, Dir. Name and Title: _____

Address

17174 Bay St.

Address: _____

Jupiter, FL 33477

Name and Title: _____

Name and Title: _____

Address

Address: _____

2022 OCT 4 PM 2:12

(H22000339825 3)

(H22000339825 3)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jay J. Carpenter
Address: 17174 Bay St.
Jupiter, FL 33477

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Jay J. Carpenter
Address: 17174 Bay St.
Jupiter, FL 33477

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

10/3/2022
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

10/3/2022
Date

2022 OCT -4 PM 2:13
CLERK OF THE
DEPARTMENT OF
STATE
FLORIDA

(H22000339825 3)