

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-224-0171
904-224-0171 FAX

800-342-8086



P9500044870

ACCOUNT NO. : 0721000000032

REFERENCE : 613384 11960A

AUTHORIZATION :

COST LIMIT : 9 PPD

ORDER DATE : June 9, 1995

ORDER TIME : 3:46 PM

ORDER NO. : 613384

CUSTOMER NO: 11960A

CUSTOMER: W. Kevin Russell, Esq
WILKINS FROHLICH JONES HEVIA
RUSSELL & SUTTER, P.A.
Sixth Floor
18501 Murdock Circle
Port Charlotte, FL 33948

TELEPHONE: 904-224-0171
FAX: 904-224-0171
****12/95****12/95

DOMESTIC FILING

NAME: INTRACOASTAL FUN CRUISES &
TRANSPORT CO.

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jennifer Moran

EXAMINER'S INITIALS:

T. BROWN

JUN 12 1995

FILED
95 JUN -9 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

INTRACOASTAL FUN CRUISES & TRANSPORT CO.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, does hereby sign and direct these articles to be delivered to the Department of State, State of Florida for the purpose of forming a corporation under the laws of the State of Florida.

ARTICLE 1. - NAME

The name of this corporation is INTRACOASTAL FUN CRUISES & TRANSPORT CO.

ARTICLE 2. - DURATION OF CORPORATE EXISTENCE

This corporation shall exist perpetually.

ARTICLE 3. - PURPOSES

The general purposes for which this corporation is organized include the transaction of any or all lawful business for which corporations may be incorporated under the provisions of Chapter 607, Florida Statutes, as the same now exists or as it may hereafter be changed.

ARTICLE 4. - CAPITAL STOCK

The aggregate number of shares of stock this corporation is authorized to have outstanding at any time is 100 shares of common stock having a par value of \$1.00 per share. There shall be no other type or class of stock.

ARTICLE 5. - ADDRESS AND REGISTERED AGENT

The street address of the initial registered office of this corporation shall be 3265 Waterside Drive, Grove City, FL 34224. The name of the initial registered agent at such address is GARY B. MACLEAN.

ARTICLE 6. - DIRECTORS

This corporation shall have one director initially. The number of directors may be increased or decreased from time to time by bylaws adopted by the shareholders, but shall never be less than one nor more than three.

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95 JUN -9 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE 7. - INITIAL DIRECTOR

The name and post office address of the initial director is:

NAME

ADDRESS

GARY B. MACLEAN

3265 Waterside Drive
Grove City, FL 34224

ARTICLE 8. - INCORPORATOR

The name and post office address of the incorporator of this corporation is:

NAME

ADDRESS

GARY B. MACLEAN

3265 Waterside Drive
Grove City, FL 34224

ARTICLE 9. - AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders and approved at a stockholders' meeting by a majority of the stock entitled to vote thereon, unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made.

IN WITNESS WHEREOF, the undersigned has hereunto subscribed his name and affixed his seal this 7th day of June, 1995.

Witnesses:

Harvey S. Elliott

Gary B. Maclean
Gary B. Maclean

Melissa A. Ametucci

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared GARY B. MACLEAN to me known to be the person described as incorporator or who has produced Articles of Incorporation as identification, and who executed the foregoing Articles of Incorporation, and he acknowledged that he executed the same for the purposes therein stated and did not take an oath.

NOTARY PUBLIC:

Sign Wm. J. E. E. E.

Sign

Amey, A. H.
Print Name

Print Name

Commission No. 1029104

Commission No.

OFFICIAL ENTRY CARD
ENTRY & EXITS
COMMUNIST FRONT
JULY 1975
BY 10-11-75-100

- 3 -

**CERTIFICATE DESIGNATING A REGISTERED AGENT AND REGISTERED OFFICE
FOR THE SERVICE OF PROCESS.**

FILED
95 JUN -9 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

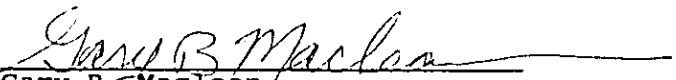
In compliance with Section 48.091, Florida Statutes, the following is submitted:

INTRACOASTAL FUN CRUISES & TRANSPORT CO., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the articles of incorporation at 3265 Waterside Drive, Grove City, County of Sarasota, State of Florida, has designated GARY B. MACLEAN, whose street address is 3265 Waterside Drive, Grove City, County of Sarasota, State of Florida, as its agent to accept service of process within this state.

INTRACOASTAL FUN CRUISES & TRANSPORT CO.

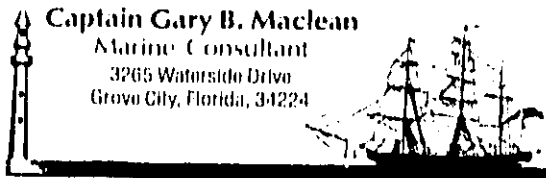
ACCEPTANCE

Having been designated as agent to accept service of process for the above-named corporation, at the place stated in this certificate, I hereby agree to act in this capacity and to comply with the provision of said law relative to same.


Gary B. Maclean

P95000044870

Requestor's Name



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Mailed to new address indicated in document:
(Corporation Name) (Document #)
915 Via Formia
2. Punta Gorda, FL 33950
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

000001737300
-03/08/96--01080--004
*****87.50 *****87.50

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|--|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

96 APR 29 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/29

*John
Name
Change
C.A.*

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

March 14, 1996

Return to CSC
~~CAPTAIN G.B. MACLEAN~~
915 VIA FORMIA
PUNTA GORDA, FL 33950

SUBJECT: INTRACOASTAL FUN CRUISES & TRANSPORT CO.
Ref. Number: P95000044870

We have received your document for INTRACOASTAL FUN CRUISES & TRANSPORT CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ✓ It appears that "Yacht" is misspelled in your new name, if you wish to have the correct spelling, please correct your document.

Please indicate what specific addresses are being changed in Articles 7 & 8 --- Is it the director's, registered agent, or mailing addresses you are changing?

You have indicated that the amendments were adopted by the directors, therefore, a director must sign -- if you are a director, please indicate your director capacity in the signature area.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6957.

Joy Moon-French
Corporate Specialist

Letter Number: 996A00011437

1301 HAYS STREET
TALLAHASSEE, FL 32301
904 222 9171
904 222 0191 FAX

800-342-8086



ACCOUNT NO. : 0021000000000
REFERENCE : 933361 112600
AUTHORIZATION :
COST LIMIT : \$ 100

ORDER DATE : April 26, 1996

ORDER TIME : 2:25 PM

ORDER NO. : 933361

CUSTOMER NO: 112600

CUSTOMER: W. Kevin Russell, Esq
Wilkins Frohlich Jones Hevia
Sixth Floor
10501 Murdock Circle
Fort Charlotte, FL 33940

DOMESTIC AMENDMENT FILING

NAME: MARINE CONSULTANT & YACHT
SALES, INC.

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: MJF

EXAMINER'S INITIALS: _____

FILED

96 APR 29 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT

1. The following provisions of the Articles of Incorporation of Intracoastal Fun Cruises & Transport Co., a Florida corporation, filed in Tallahassee on June 9, 1993, be and they hereby are amended in the following particulars:

Article I be and it hereby is amended to read as follows:

"The name of this corporation is MARINE CONSULTANT & YACHT SALES, INC."

2. The foregoing amendment was adopted by the Stockholders and Directors of the corporation on the 13 day of April, 1996.

IN WITNESS WHEREOF, the undersigned President and Secretary of this corporation have executed these Articles of Amendment this 13th day of April, 1996.

INTRACOASTAL FUN CRUISES &
TRANSPORT CO.

By: Gary B Maclean
President

By: Nancy M Young
Secretary

STATE OF FLORIDA
COUNTY OF CHARLOTTE

GARY B Maclean + Nancy M Young
BEFORE ME, the undersigned authority, personally appeared Gary B Maclean + Nancy M Young personally known to me to be the person or who has produced personally known as identification, and who executed the foregoing Articles of Amendment and who acknowledged before me that he/she executed such instrument for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 13 day of April, 1996.

Sherry L Porter
Notary Public, State of Florida

Sherry L. Porter
Print Name

My commission expires:

