

P96000062767

TRANSMITTAL LETTER

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

100001904071
-07/25/96---01038---0110
*****70.00 *****70.00

SUBJECT: Marine Suppliers International, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check.

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FILED
DEPT. OF STATE
DIVISION OF CORPORATIONS
96 JUL 25 PM 4: 04

FROM: Barbara Byers
Name (printed or typed)

4872 N.E. 12th Ave.
Address

Ft. Lauderdale, FL 33334
City, State & Zip

(904) 772-1620
Daytime Telephone number

5/7/26

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

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Barbara Byers
4872 NE 12th Avenue
Ft. Lauderdale, FL 33334

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

23 day of July, 19 96.

(An additional article must be added if an effective date is requested.)

Barbara H. Byers
Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Marine Supplies International, Inc.

2. The name and address of the registered agent and office is:

Barbara Byers

(NAME)

4872 N.E. 12th Ave.

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Ft. Lauderdale Florida 33334

(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Barbara H. Byers
(SIGNATURE)

7-23-96
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

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