

P960000 70954

TRANSMITTAL LETTER

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

800001920248
-08/13/96--01103--001
*****78.75 *****78.75

SUBJECT: Family Outing Boat Rentals, Inc.
(Proposed corporate name - must include suffix)

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

☐ \$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

SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG 26 AM 8:45

FROM: Darlene Nelson-Ollphant, C.P.A.
Name (printed or typed)
2071 S. W. 70th Avenue, Suite G8
Address
Davie, FL 33317
City, State & Zip
954 723-0256
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 15, 1996

DARLENE NELSON-OLIPHANT, C.P.A.
2071 SW 70TH AVE., STE. G8
DAVIE, FL 33317

SUBJECT: FAMILY OUTING BOAT RENTALS, INC.
Ref. Number: W96000017065

We have received your document for FAMILY OUTING BOAT RENTALS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include original signatures.

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) 487-6924.

Sharon Tala
Document Specialist Supervisor

Letter Number: 096A00038839

*OK
See attached.*

**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: Family Outing Boat Rentals, Inc.

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

Darlene Nelson-Oliphant, C.P.A.

(NAME)

2071 S. W. 70th Avenue, Suite G8

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

Davie, FL 33317

(CITY/STATE/ZIP)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 AUG 26 AM 8:45

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.

Darlene Nelson-Oliphant
(SIGNATURE)

August 6, 1996

(DATE)

Darlene Nelson-Oliphant

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