

# P96000089494

## CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

No 53523

RE: Inland Marine  
Towing Inc.

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

96 OCT 30 PM 4:26

OCT 30 1996



REQUEST TAKEN CONFIRMED APPROVED

DATE \_\_\_\_\_

TIME 4:00 CK No. \_\_\_\_\_

BY [Signature]

WALK-IN Will Pick Up 10/30 4:00

C.C. FEE. DISBURSED

<input type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal	****122.50	****122.50
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s. Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ( )		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX ( ) pgs.		

SUBTOTALS

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

## ARTICLES OF INCORPORATION

FILED

96 OCT 30 PM 4:26

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

ISLAND MARINE TOWING, INC.

### ISLAND MARINE TOWING TowBOAT/U.S.

COLLIER COUNTY'S ONLY  
APPROVED TowBOAT/U.S.



MARINE TOWING • JUMPS STARTS  
EMERGENCY PUMING • FUEL DROPS  
DOCK-TO-DOCK TOWING • DIVING  
Wiggins Pass to The Keys

Office/Fax: (941) 389-1177  
Boat: (941) 591-5672

BOAT/U.S. Members Call "TowBOAT/U.S."  
VHF Channel 16

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

928 SUMNER CT.  
MARCO ISLAND, FL 34145

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 ONE THOUSAND

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAVID P. SATTERFIELD  
928 SUMNER CT.  
MARCO ISLAND, FL 34145

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):

DAVID P SATTELFIELD  
928 SUNDROP CT.  
MARCO ISLAND, FL 39185

THE PURPOSE OF THIS CORPORATION BEING TO PROVIDE MARINE TOWING,  
SALVAGE AND OTHERWISE REQUESTED SERVICES, AS NEEDED, WITHIN OUR  
LICENSED CAPABILITIES, FOR BOTH COMMERCIAL & NON COMMERCIAL VENTURES.

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

19 day of SEPTEMBER, 19 86.

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

  
\_\_\_\_\_  
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: ISLAND MARINE TOURS, INC.
2. The name and address of the registered agent and office is:

DAVID P. SATTERFIELD  
(NAME)

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

MARCO ISLAND, FL 39455  
(CITY/STATE/ZIP)

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55 OCT 30 PM 4:26  
TALLAHASSEE, FLORIDA

*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.*

  
(SIGNATURE)

10/28/76  
(DATE)