

99 AUG 13 PM 2: 59

LEURCTARY OF STATE TALLAHASSEE, FLORIDA

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

	(Proposed corporate name - must include suffix)			
	•	a ' s	200002959 -08/13/991 *****87.50	01057008
nclosed is an origin	al and one(1) copy of the article	s of incorporation and a	check for:	1
S70.00 - Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Section \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	M. VICTORIA STILLWELL			
	Name (Pr	inted or typed)		
	P. O. Box 1419			
	A	ddress		
	Bonita Springs, Florida		· ·	
	City, S	State & Zip		
	(941) 671-4120			

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

ARTICLES OF INCORPORATION

FILED 99 AUG 13 PM 2: 59

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

JEORETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

LITTLE HICKORY MARINA, INC.

ARTICLE II PRINCIPAL OFFICE

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

26107 Hickory Blvd. Bonita Springs, FL 34134

P. O. Box 1419 Bonita Springs, FL 34133 (for mailing)

ARTICLE III SHARES

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

1,000 _ (one thousand)

The name and Florida street address of the initial registered agent are:

H. VICTORIA STILLWELL 27270 Arroyal Rd. Bonita Springs, FL 34135

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

M. VICTORIA STILLWELL 27270 Arroyal Rd. Bonita Springs, FL 34135

Signature/Incorporator

10 august 1999

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

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/Registered Agent

Date