

R25000007542

2.11.25

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

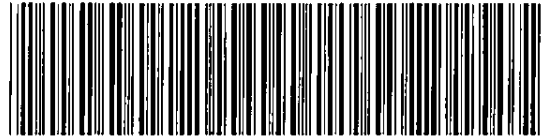
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke to James Ryan He

Approved 100 shares.

Office Use Only



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01/30/25--01010--021 •••••

FILED
JAN 30 2025
25 JAN 30 PM 2:11

COVER LETTER

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

SUBJECT: Aquatic Artisans, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: James E. Ryan
Name (Printed or typed)

1791 Trade Center Way #C
Address

Naples, Florida 34109
City, State & Zip

239 431 7807
Daytime Telephone number

ap@aquaticarchitects.com
E-mail address (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Aquatic Artisans, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1791 Trade Center Way #C
Naples, Florida 34109

n/a

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Reorganizing corporation.

ARTICLE IV SHARES

The number of shares of stock is: Ø 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Ryan / President

Name and Title: _____

Address 4010 Randall Blvd
Naples, FL 34120

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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FILED
STATE
CLERK

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: James Ryan

Address: 4010 Randall Blvd

Naples, FL 34120

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: James Ryan

Address: 4010 Randall Blvd

Naples, FL 34120

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

James Edward Ry
Required Signature/Registered Agent

Jan 8th 2025
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

James Edward Ry
Required Signature/Incorporator

Jan 8th 2025
Date