



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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2020 FEB -3 PM 12:41

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is: Florida Floats, Inc.		
2. It is incorporated under the laws of: Florida		
3. The name, if different, which it elects to use in Rhode Island is: (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island: (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:		
4. The date of its incorporation is: 02/07/1969		
And the period of its duration is: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
5. The address of its principal office is: 1323 Lincoln Street, Bellingham, WA 98229		
6. The name and address of the initial registered agent/office in Rhode Island:		
Agent Name Corporation Service Company		
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200		
City/Town Warwick	State RHODE ISLAND	Zip Code 02888

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Manufacture and installation of floating docks

8. (a) The names and respective addresses of its directors (optional, unless directors are required under the laws of the state or country of which it is incorporated):

NAME	ADDRESS
Joseph J. Ueberroth	1323 Lincoln Street, Bellingham, WA 98229
Tina M. Jeffcoat	1323 Lincoln Street, Bellingham, WA 98229
Crystal Greear	1323 Lincoln Street, Bellingham, WA 98229

Check the box to indicate an attachment ☒

8. (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated):

OFFICE	NAME	ADDRESS
PRESIDENT	please see attached	
VICE PRESIDENT		
TREASURER		
SECRETARY		

Check the box to indicate an attachment ☒

9. The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
5,000.00	Common		1.0000

10. An estimate, as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. (Note: Percentage obtained from worksheet.)

0 %

11. An estimate, as a percentage, of the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. (Note: Percentage obtained from worksheet.)

0 %

12. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of this filing.

13. Date when the Certificate of Authority will be effective: **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

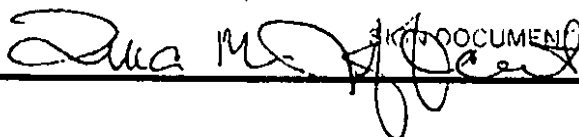
Type or Print Name of Authorized Officer

Tina M. Jeffcoat

Date

January 13, 2020

Signature of Authorized Officer of the Corporation

 SIGN DOCUMENT HERE

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FLORIDA FLOATS, INC.

LIST OF DIRECTORS

Joseph J. Ueberroth
Business Address: 610 Newport Center Drive Suite 490, Newport Beach, CA 92660

Tina M. Jeffcoat
Business Address: 1323 Lincoln Street, Bellingham, WA 98229

Crystal Greear
Business Address: 1323 Lincoln Street, Bellingham, WA 98229

LIST OF OFFICERS

Joseph J. Ueberroth - CEO
Business Address: 610 Newport Center Drive Suite 490, Newport Beach, CA 92660

Tina M. Jeffcoat - Secretary & Vice President of Administration
Business Address: 1323 Lincoln Street, Bellingham, WA 98229

Crystal Greear - CFO
Business Address: 1323 Lincoln Street, Bellingham, WA 98229

Craig S. Funston - Vice President of Engineering
Business Address: 1323 Lincoln Street, Bellingham, WA 98229

Kevin Thompson - Vice President & General Manager
Business Address: 1813 Dennis Street, Jacksonville, FL 32204

Edward Heaton - Vice President & General Manager
Business Address: 225 Hanover Rd, York, PA 17408

Tony Garrett - Vice President & General Manager
Business Address: 5613 Barbados Blvd, Castle Hayne, NC 28429

State of Florida

Department of State

I certify from the records of this office that FLORIDA FLOATS, INC. is a corporation organized under the laws of the State of Florida, filed on February 7, 1969.

The document number of this corporation is 341232.

I further certify that said corporation has paid all fees due this office through December 31, 2020, that its most recent annual report/uniform business report was filed on January 17, 2020, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Thirtieth day of January, 2020*



Samuel R. Bee
Secretary of State

Tracking Number: 3704374380CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

February 03, 2020 12:41 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

