

F21000002422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

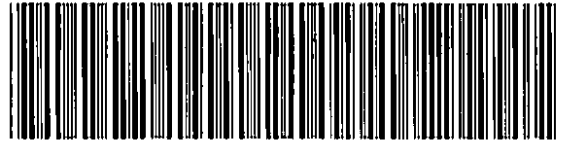
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAY -3 PM 2:15

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APPROVAL AND FILED

MAY 03 2021
Brumbley

FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 5/3/2021

NAME: MANALAPAN BLUE WATER PARADISE INC.

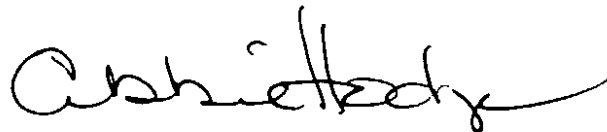
TYPE OF FILING: APPLICATION

COST: 70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Manalapan Blue Water Paradise Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 86-3541670
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 28, 2021 5.
(Date of Incorporation) (Date of duration, if other than perpetual)

6. April 28, 2021
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 277 Royal Poinciana Way, Suite 187, Palm Beach, FL 33480
(Principal office street address)

(Current mailing address, if different)

8. Please see attached.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Florida Filing & Search Services, Inc.

Office Address: 155 Office Plaza Drive, Suite A

Tallahassee, Florida 32301
(City) (Zip Code)

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10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Handwritten Signature]
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Yogesh Babla
 Vice Chairman Address: 277 Royal Poinciana Way
 Director Suite 187
 President Palm Beach, FL 33480
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: Bruce Levine
 Vice Chairman Address: 277 Royal Poinciana Way
 Director Suite 187
 President Palm Beach, FL 33480
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

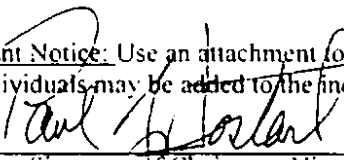
Chairman Name: Paul J. Dostart
 Vice Chairman Address: 4180 La Jolla Village Drive
 Director Suite 530
 President La Jolla, CA 92037
 Vice President _____
 Secretary _____ Treasurer _____
 Other: Assistant Secretary Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other: _____ Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Paul J. Dostart, Assistant Secretary
(Typed or printed name and capacity of person signing application)

**ATTACHMENT TO
APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

Manalapan Blue Water Paradise Inc.

8. Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida.

The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.

This corporation shall be a nonprofit corporation. This corporation is organized for social welfare purposes within the meaning of the Internal Revenue Code Section 501(c)(4), and specifically to promote greater access to the waterways of Manalapan, FL. Notwithstanding any other provision of these articles, this corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from federal income tax under Section 501(c)(4) of the Internal Revenue Code.

The property of this corporation is irrevocably dedicated to social welfare purposes and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer, or member thereof, nor to the benefit of any private person. Upon the dissolution or winding up of the corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit entity identified by the Board of Directors which has established its tax exempt status under Section 501(c)(4) or 501(c)(3) of the Internal Revenue Code.

Personal liability of all directors of the corporation to the corporation for monetary damages of breach of duty of care or other duties as a director is hereby eliminated to the extent allowed by the Delaware Nonprofit Corporation Law. To the fullest extent provided by Delaware law, the private property of the directors shall be non-assessable and shall not be subject to the payment of any corporate debts, nor shall the directors of the corporation become individually or corporately liable or responsible for any debts or liabilities of the corporation.

Delaware

Page 1


The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MANALAPAN BLUE WATER PARADISE INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MANALAPAN BLUE WATER PARADISE INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2021.




Jeffrey W. Bullock, Secretary of State

5878800 8300C

SR# 20211540533

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203102778

Date: 04-30-21