F 21000005458

(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:				
W21-12705				

Office Use Only



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09/20/21--01028--028 **87.50





September 22, 2021

QUINTON TERRIO 1829 TALLOKAS AVE ORLANDO, FL 32805

SUBJECT: INLAND FRESH SEAFOOD CORPORATION OF AMERICA, INC.

Ref. Number: W21000127765

We have received your document for INLAND FRESH SEAFOOD CORPORATION OF AMERICA, INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have to list your officers and dicrectors separately with thier titles and name and addresses.,

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 321A00022938

Suzanne Hawkes Regulatory II

www.sunbiz.org

COVER LETTER

•

TO: Registration Section Division of Corporations	•	
SUBJECT: Tulano Fresh Sen. Name of corporation	FOOD Corp. or America INC.	
Name of corporation	must include suffix	
Dear Sir or Madam.		
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standabove referenced foreign corporation to transact business	ling" and check are submitted to register the	
Please return all correspondence concerning this matter	to the following:	
Quinton. Te	erio	
Name of F	Person	
Inland Se	A FOOD	
Firm/Com	pany	
1829 Tall	OKAS AUE	
Addre	SS •	
Orlapo	Fl. 32805	
City/State ar		
Lisa, Wang @:	TNIAND SEAPOOD . COM	
E-mail address: (to be used for	or future annual report notification)	
For further information concerning this matter, please ca	all:	
•		
Name of Person Area Code) 3d9-0396	
Name of Person Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS: •	
Registration Section Registration Section Division of Corporations Division of Corporations		
The Centre of Tallahassee P.O. Box 6327		
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	Tallahassee, FL 32314	
Enclosed is a check for the following amount:	•	
Please make check payable to FLORIDA DEPARTMENT		
S70.00 Filing Fee S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

•	ible in Florida, enter alternate c	-			orida)
2.	Seor6ia y under the law of which it is ii	3.	26-1929	196	
(State or country	y under the law of which it is i	ncorporated)	(FEI number, if ap	oplicable)	
4	of incorporation)	5			
(Date	of incorporation)		(Date of duration, if other	than perpetual)	
6			da, if prior to registration) S., to determine penalty habil	ıty)	
7.	•		Circle Tuck		30084
, . <u></u>		(Principal office str		· · · · · · · · · · · · · · · · · · ·	
		(Current mailing add	ress, if different)	•	
8. Name and stree	t address of Florida register		,	•	
	t address of Florida register	ed agent: (P.O. Box	(<u>NOT</u> acceptable)	•	
Name:		ed agent: (P.O. Box	(<u>NOT</u> acceptable)	•	
Name:	Quinton 1829 Jalle	ed agent: (P.O. Box	NOT acceptable)	•	
Name:	Quinton 1829 Jalle	ed agent: (P.O. Box	(<u>NOT</u> acceptable)	•	
Name: Office Address: 9. Registered age Having been nam designated in this further agree to co	Quinton 1829 Ja 110 Orlando (City)	to accept service of all statutes relative	NOT acceptable) Florida 3205 (Zip code) process for the above state as registered agent and agree to the proper and comple	ee to act in thi	s capacity. I
Name: Office Address: 9. Registered age Having been nam designated in this further agree to co	QUINTON 1829 Ja 110 Orlando (City) ent's acceptance: ed as registered agent and a application, I hereby acceptomply with the provisions of	to accept service of all statutes relative	NOT acceptable) Florida 3205 (Zip code) process for the above state as registered agent and agree to the proper and comple	ee to act in thi	s capacity. I

10. 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.

A. DIRECTORS			2
Chairman	Name JOEC ICNOX	Chairman	Name Les Schneider
Ovice Chairman	Address 1082 Lull Water Rd	□Vice Chairman	Address 969 Castle Falls Dv.
Director	Atlanta GA 30084	Director	Atlanta GA 30329
□ President	Chair Rosen benjer	President	
□Vice President	Brut Dexmanded	□ Vice President	
Secretary 😝	Creasurer Creasurer	12 Secretary	☐ Treasurer
MOther GATE	Substitution OFO Foundly	Other	☐ Other
□ Cheirman	Name Chris Rosenberger	□ Chairman	Name Eric Sussman
□ Vice Chairman	Address. 2097 Proxilew Dr.	□ Vice Chairman	Address 4533 Highlands Plain C
Director	Atlanta Any 30318	Director	Marietta GIA 30066
(X) President		☐ President	•
□Vice President		□ Vice President	
☐ Secretary	☐ Treasurer	☐Secretary.	☐ Treasurer
Other	Other	BOther CF	Other
Chairman	Name Bill Demmond	Chairman	Name.
□Vice Chairman	Address 2692 Making Rd	∵□ Vice Chairman	Address
Director	Brookhaven BA 30819	'□Director	
□President		□President	
□Vice President		□Vice President	
☐ Secretary	☐ Treasurer	Secretary	☐ Treasurer
200ther <u>COO</u>	Other	Other	[]Other
Laura anna i Matroau	Use an attachment to report more than six (6) The att	ochmant will be imag	ned for renowing numbers only. Non-indexed
	e added to the index when filing your florida Departm		
12	a fun-		<u> </u>
:	Signature of Director	or Officer	
The officer or dire	ector signing this document (and who is listed in numb false information submitted in a document to the Depar	er 11 above) affirms timent of State consti	that the facts stated herein are true and that he or itutes a third degree felony as provided for in

Control Number: H907585

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

INLAND FRESH SEAFOOD CORPORATION OF AMERICA, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number : 21843053 Date Inc/Auth/Filed: 03/18/1976 Jurisdiction : Georgia Print Date : 09/16/2021 Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State