

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 536048

**FILED**  
**Mar 05, 2014**  
**Secretary of State**

**Entity Name:** APALACHICOLA OYSTER WORKS, INC.

**Current Principal Place of Business:**

103 MARINE ST.  
CARRABELLE, FL 32322

**New Principal Place of Business:**

564 RHODEN COVE ROAD  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

P.O. BOX H  
CARRABELLE, FL 32322

**New Mailing Address:**

564 RHODEN COVE ROAD  
TALLAHASSEE, FL 32312

**FEI Number:** 59-1919245

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WATKINS, J. BEN  
103 MARINE ST.  
CARRABELLE, FL 32322 US

**Name and Address of New Registered Agent:**

WATKINS, J. BEN III  
564 RHODEN COVE ROAD  
TALLAHASSEE, FL 32312 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: J BEN WATKINS , III

03/05/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WATKINS, J. BEN III  
Address: 564 RHODEN COVE ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: J BEN WATKINS III

PRES

03/05/2014

Electronic Signature of Signing Officer or Director

Date