F19000000475

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ċi	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
W190	XXXXX	

Office Use Only



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C CAVE JAN 28 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 17, 2019

THOMAS M. MCCRUDDEN 72 AZALEA CIRCLE TEQUESTA, FL 33469

SUBJECT: GREAT FLORIDA SHELLFISH COMPANY

Ref. Number: W19000006277

We have received your document for GREAT FLORIDA SHELLFISH COMPANY and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Cathy Cave

Letter Number: 019A00001380

COVER LETTER

TO:	Registration Section Division of Corpo	rations			
SHRI	ECT: Gre	A Florida S	5hell:	Fish Com	192 V
30130	ner	Name of corporat	tion - mus	t include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence,"	by Foreign Corporation or "Certificate of Good Storporation to transact bus	Standing"	and check are sub	
Please	return all correspon	dence concerning this ma	itter to the	following:	
	Thomas	M. MEn	Idea		
		Name	of Person		
	Great F	Torida Shellt	かく Company	-onpeny	
	72 A.	ealea Circle		,	
		Ac., FL 3346 City/Sta	ــــــــــــــــــــــــــــــــــــــ		
	1 equesta	, FL 3376	te and Zin	code	
	raiclan	City/Sta 15 @ bel/sout E-mail address: (to be us	1. ne	+	
		E-mail address: (to be us	ed for futi	ure annual report i	notification)
For fu	rther information co	ncerning this matter, plea	se call:		
To	m McCruo	lden at (56	<u>7_)_</u>	702-81	59
	Name of Person	Area (Code	Daytime Telep	hone Number
	STREET/COUR Registration Section			MAILING A Registration S	
Division of Corporations				Division of Corporations	
	Clifton Building 2661 Executive Control Tallahassee, FL 3			P.O. Box 6327 Tallahassee, F	
Enclos	sed is a check for the	following amount:			
57 (0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		75 Filing Fee & ified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	WITH SECTION 607.1503, FLORIDA S17 REIGN CORPORATION TO TRANSACT BU	ATUTES, THE FOLLOWING IS SUBMITTED TO USINESS IN THE STATE OF FLORIDA.
1. Great	Florida Shelltish	LONDANY CORPORATIONS
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,
/1.C	11 P1 1	
a /	·	dopted for the purpose of transacting business in Florida)
2. Delaw	y under the law of which it is incorporated)	83-2686/83 (FEI number, if applicable)
vstate or country	/	(i El number, il applicable)
4. ///30 _/	// } 5, _ of incorporation)	(Date of duration, if other than perpetual)
	1/1/19	(Sale of diffactor, it offer that perpetuity
6	(Date first transacted business in I	Florida, if prior to registration)
	(SEE SECTIONS 607.1501 & 607.150	
7 72	Azalea Circle Teque	sto FL 33469
	Frincipa	15 f
	(Current mailing	address, if different)
8. Name and stree	t address of Florida registered agent: (P.O.	. Box <u>NOT</u> acceptable)
Name:	Ton Mc Cruden	
~	72 Azalea Cirle	
Office Address:	,	
	Tepuesta	. Florida <u>33469</u>
	(City)	(Zip code)
9. Registered age	nt's acceptance:	
Having been nam	ed as registered agent and to accept servic	e of process for the above stated corporation at the place
		ent as registered agent and agree to act in this capacity. Elative to the proper and complete performance of my
	amiliar with and accept the obligations of	
		1
-	The a U	
	(Registered ag	gent's signature)

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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
Address.
B. OFFICERS
President: Ton McCrudden
President: Ton McCrudden Address: 72 Acadea Circle Teguesta, FL 33469
Te = 45 FL 33469
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. The holl
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.
13 Thomas M McCoudden

(Typed or printed name and capacity of person signing application)

State of Delaware
Secretary of State
Division of Corporations
Delivered 05:08 PM 12/04/2018
FILED 05:08 PM 12/04/2018
SR 20187960154 - File Number 7180156

STATE OF DELAWARE CERTIFICATE OF FORMATION OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

 The name of the limited I 	iability company is
Great Florida Shellfish Compa	• • • —————————————————————————————————
 The Registered Office of 	the limited liability company in the State of Delaware is
located at 300 Delaware Avenue	
in the City of Wilmington	, Zip Code 19801 The
	such address upon whom process against this limited
	is United States Corporation Agents, Inc.
	By: /s/ Cheyenne Moseley
	Authorized Person
	LegalZoom.com, Inc., Organizer
	Die Chevenne Mareley Assistant Soomers
	Print or Type

Re: Great Florida Shellfish Company LLC

To Whom It May Concern:

According to Great Florida Shellfish Company LLC Limited Liability Company Agreement, the members of Great Florida Shellfish Company LLC, are as follows:

Thomas M. McCrudden

The authority, rights and duties of the members are set forth in the Company's Limited Liability Company Agreement.

Furthermore, LegalZoom resigns as organizer for the Company effective upon the date of this letter.

Yours sincerely,

LegalZoom.com, Inc.

Ву:_____

Cheyenne Moseley

Authorized Representative

Agreed to on:

By:

Name:

"Representative"

Date of this notice: 11-30-2018

Employer Identification Number:

83-2686183

Form: SS-4

Number of this notice: CP 575 A

GREAT FLORIDA SHELLFISH COMPANY THOMAS M MCCRUDDEN MBR 72 AZALEA CIR TEQUESTA, FL. 33469

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

. WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 83-2686183. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 940	01/31/2019
Form 943	01/31/2019
Form 1065	03/15/2019

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.