

F23000001959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

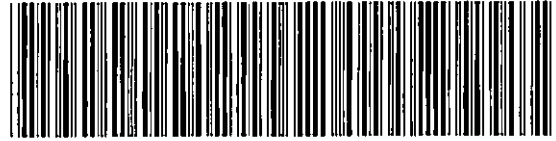
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Special Instructions to Filing Officer:

W23000034092

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RECEIVED

FEB 21 2023

FILED  
MAR 31 PM 4:44  
TOLSON



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 13, 2023

JACK SNODGRASS  
2025 ANGLERS PLACE RD  
BROWNSVILLE, TX 78526 US

SUBJECT: SHRIMP TRAWLER VALLY INCORPORATED  
Ref. Number: W23000034092

We have received your document for SHRIMP TRAWLER VALLY INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

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) 245-6051.

Andrea Andrews  
Regulatory Specialist II

Letter Number: 323A00005756

RECEIVED

MAR 13 2023

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SHRIMP TRAWLER VALLY INCORPORATED

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JACK SNODGRASS

Name of Person

SHRIMP TRAWLER VALLY INCORPORATED

Firm/Company

2025 ANGLERS PLACE RD

Address

BROWNSVILLE, TEXAS 78526

City/State and Zip code

TVASQUEZ@PAULPIAZZA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TERIE VASQUEZ

at (956) 4657564

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
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.

1. SHRIMP TRAWLER VALLY INCORPORATED  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- SHRIMP TRAWLER VALLY INCORPORATED II  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. TEXAS 3. 74-2430616  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. JANUARY 13, 1986 5. PERPETUAL  
(Date of incorporation) (Date of duration, if other than perpetual)
6. NONE  
(Date first transacted business in Florida, if prior to registration)
7. 2025 ANGLERS PLACE ROAD BROWNSVILLE, TX 78526  
(Principal office street address)

(Current mailing address, if different)


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

Name: ERICKSON & JENSEN SEAFOOD

Office Address: 1100 SHRIMP BOAT LN  
FORT MYERS BEACH, Florida 33931  
(City) (Zip code)

9. 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.*

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

SECRETARY OF STATE

2023 MAR 31 PM 4:44

FILED

### A. DIRECTORS

☐ Chairman Name: SAMMY F SNODGRASS

☐ Vice Chairman Address: 2025 ANGLERS PLACE ROAD

☐ Director BROWNSVILLE, TEXAS 78521

☒ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman      Name: SAMMY F SNODGRASS

☐ Vice Chairman      Address: 2025 ANGLERS PLACE ROAD

☒ Director      BROWNSVILLE, TEXAS 78521

☐ President      \_\_\_\_\_

☐ Vice President      \_\_\_\_\_

☐ Secretary      ☐ Treasurer

☐ Other      \_\_\_\_\_      ☐ Other      \_\_\_\_\_

☐ Chairman Name: JACK SNODGRASS

☐ Vice Chairman Address: 2025 ANGLERS PLACE ROAD

☐ Director BROWNSVILLE, TEXAS 78521

☐ 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 \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director \_\_\_\_\_

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**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.

12. \_\_\_\_\_ 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. SAMMY F SNODGRASS  
(Typed or printed name and capacity of person signing application)

Corporations Section  
P.O. Box 13697  
Austin, Texas 78711-3697



Jane Nelson  
Secretary of State

## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for SHRIMP TRAWLER VALLY INCORPORATED (file number 78136700), a Domestic For-Profit Corporation, was filed in this office on January 13, 1986.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 07, 2023.



A handwritten signature in cursive script that reads "Jane Nelson".

Jane Nelson  
Secretary of State