

NIL000005108

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FILED
16 MAY 16 PM 2:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

12. Outagam MAY 13 2016

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Inland Sea Aquaponics, Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Rebecca Aman

Name (Printed or typed)

3353 Marion Oaks Way

Address

Pensacola, FL 32507

City, State & Zip

850-380-9599

Daytime Telephone number

inland.sea.aquaponics@cox.net

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

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: Inland Sea Aquaponics, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
3353 Marion Oaks Way

Pensacola, FL 32507

Mailing address, if different is:

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TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To establish and run an aquaponics farm to employee individuals with disabilities and
establish educational programs for local schools and institutions of higher learning.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: In corporate by-laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Aman, President

Name and Title: _____

Address 3353 Marion Oaks Way
Pensacola, FL 32507

Address: _____

Name and Title: Rebecca Aman, Treasurer

Name and Title: _____

Address 3353 Marion Oaks Way
Pensacola, FL 32507

Address: _____

Name and Title: Hannah Aman, Secretary

Name and Title: _____

Address 3353 Marion Oaks Way
Pensacola, FL 32507

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Rebecca Aman
Address: 3353 Marion Oaks Way
Pensacola, FL 32507

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Rebecca Aman
Address: 3353 Marion Oaks Way
Pensacola, FL 32507

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Rebecca Aman
Required Signature of Registered Agent

5-13-16
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Rebecca Aman
Required Signature of Incorporator

5-13-16
Date

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Address: 3353 Marion Oaks Way Address: _____
Pensacola, FL 32507

Name and Title: Rebecca Aman, Treasurer Name and Title: _____

Address: 3353 Marion Oaks Way Address: _____
Pensacola, FL 32507

Name and Title: Hannah Aman, Secretary Name and Title: _____

Address: 3353 Marion Oaks Way Address: _____
Pensacola, FL 325070

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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Effective date, if other than the date of filing: _____ (OPTIONAL)

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