## TROUBLE EFF

P. O. Box 6327 Tallahassee, FL 32314

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SUBJECT:

Indian River Clam Co.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for:		•••
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 \$\square \\$87.50\$  Filing Fee Filing Fee, & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED			
FROM:	Christopher S	stevenson			
	Name (Printed or typed)				
	877 NW 13 ST			TAT SF	00
	Address			:CRE	HAY
	Stuart, FL			SECRETARY TALLAHASSET	15 f
	City, State & Zip				ā

Y //

561-979-6233

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

Daytim# Telephone number

## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) The name of the corporation shall be: Indian River Clam Co. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 877 NW 13ST, Stuart, Pl. 34994 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Clam farming ARTICLE IV SHARES The number of shares of stock is: 1,000 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): REGISTERED AGENT The name and Florida street address registered agent is: Christopher Stevenson 877 NW 132T Stuart, Fl. 34994 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Christopher Stevenson 877 NW 135T stuart, Fl. 34994 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

Signature/Registered Agent