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Florida Department of State

Division of Corporations
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To:

Division of Corporations Fax Number : (850)922-4001

From:

Account Name : BARINAS & ASSOCIATES INC.

Account Number: 120000000082
Phone: (305)871-0889
Fax Number: (305)870-9623

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

SHRIMPFEEDER INC

1D	
Certified Copy Page Count	04

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

SHRIMPFEEDER INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

DO OCT 12 PH 1:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8313 NW 68TH ST MEDLEY FL 33166

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

2000 SHARES AT \$1.00 PAR VALUE

HUGO M BRITO 1000 SHARES NETUNO USA INC 1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

HUGO M BRITO 8313 NW 68TH ST MEDLEY FL 33166

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

HUGO M BRITO NETUNO USA INC 1450 BRICKELL BAY DR APT 715 2200 NW CORPORATE BLVD STE308 MIAMI FL 33131 BOCA RATON FL 33018

ARTICLE VI

PRESIDENT HUGO M BRITO

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12TH	OCTOBE		
r	day of	, 2000	
{An ad	ditional article mus	be added if an effective date is requested.)	
		Suppo.	
		Signature	
== 1		to the second	4 .
		Signature	
		Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

SHIMPFEEDER INC

1. The name and address of the registered agent and office is:	7.0
HUGO M BRITO	D OCT
(NAME) 8313 NW 68 TH ST	12 PM
(P.O. BOX OR MAIL DROP BOX NOT ACCEPTABLE)	STAT STAT
MEDLEY FL 33166	IDA O
(CLEVSTATE //ID)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

10/12/2000

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314