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01 FEB 27 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Re: Incorporation

000003747560-5
-02/22/01--01078--018
*****70.00 *****70.00

Please find enclosed the transmittal letter and pertinent information for the incorporation of Bottom Line Fish Co., Inc, along with a check in the amount of \$70.00.

Please send these papers to the address of our bookkeeper:

Nettie Davis, Inc
1500 S. First St.
Lake City, FL 32025
904 59-3124977

If any further information is needed to complete the incorporation please do not hesitate to contact me.

Thanking you in advance,

Nettie Davis
Nettie Davis

CB3-1
W-014250



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 23, 2001

NETTIE DAVIS, INC.
1500 S FIRST ST.
LAKE CITY, FL 32025

SUBJECT: BOTTOM LINE FISH CO., INC.
Ref. Number: W01000004250

We have received your document for BOTTOM LINE FISH CO., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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) 487-6925.

Cynthia Blalock
Document Specialist

Letter Number: 901A00011407

*Change to
Bottom Line Fish Coalition, Inc.*

ARTICLES OF INCORPORATION

OF

Bottom Line Fish Coalition Inc

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Bottom Line Fish Coalition Inc

ARTICLE II PRINCIPAL OFFICE

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

Rt 13, Box 579
Lake City Fl 32055

ARTICLE III CAPITAL STOCK

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Joey Williams
Rt 13 Box 579
Lake City Fl 32055

ARTICLE V INCORPORATOR(S)

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

Joey Williams
Rt 13, Box 579
LAKE CITY FL 32055

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

9th day of February, 18 2001

Joe W. Williams
Signature/Title

Signature/Title

Signature/Title

**CERTIFICATE OF DESIGNATION
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.

1. The name of the corporation is: Bottom Line Fish ^{Co.} ~~Co.~~ Inc

2. The name and address of the registered agent and office is:

Joey Williams
(NAME)
Rt 13 Box 579
(P.O. BOX NOT ACCEPTABLE)
LAKE City FL 32055
(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SIGNATURE Joe W. Williams
TITLE Director
DATE 2/9/01

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.

SIGNATURE Joe W. Williams
DATE 2/9/01