

TRANSMITTAL LETTER

P010000107652

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

SUBJECT: Lee County Fisherman's Cooperative, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

ADDITIONAL COPY REQUIRED

FROM: Lee County Fisherman's Cooperative, Inc.  
Name (Printed or typed)

6001 Maria Drive  
Address

St. James City, Florida 33956  
City, State & Zip

941-283-1173  
Daytime Telephone number

100004663901--8  
-11/02/01--01029--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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

FILED  
01 NOV 13 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W01-26076  
11/11/14

Department Of State  
Divison Of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314  
(850)245-6052

november 5, 2001

Lee County Fisherman's Cooperative, Inc.  
Is no longer a nonprofit Corporation.  
It WILL BE a PROFIT Corporation from this  
point forward.

President: John Patrick



Beth Smith  
My Commission CC989798  
Expires December 25, 2004

*Beth Smith*  
11/5/01

*John Patrick*

P362-472-56-170-0  
FL DEL.

Re:

Lee County Fisherman's  
Co-op, Inc.  
6001 Maria Drive  
St. James City, FL 33956

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be:

Lee County Fisherman's Cooperative, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6001 Maria Dr.  
St. James City, FL 33956

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For-profit commercial fish house selling fish wholesale + retail.

### ARTICLE IV SHARES

The number of shares of stock is: one

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

John Patrick, President, Secretary  
Kim Gerz, Vice-President, Treasurer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

John Patrick, ~~5446~~ Flamingo Dr., St. James City, FL 33956  
5264

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John Patrick, ~~5446~~ Flamingo Dr., St. James City, FL 33956  
5264

\*\*\*\*\*  
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

John Patrick  
Signature/Registered Agent

10/25/01  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date