

P03000068073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
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✓

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TRANSMITTAL LETTER

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

SUBJECT: Brown's
BROWN'S CEDAR KEY CLAMS, 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: HENRY J. BROWN
Name (Printed or typed)

P O BOX 579
Address

CEDAR KEY, FL 32625
City, State & Zip

352-543-5189
Daytime Telephone number

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

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:

BROWN'S CEDAR KEY CLAMS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P O BOX 579
CEDAR KEY, FL 32625

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CLAM FARMING AND SELLING AND ALL OTHER OPERATIONS PERMISSIBLE FOR
GENERAL CORPORATIONS IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

HENRY J. BROWN, P O BOX 579, CEDAR KEY, FL 32625, PRESIDENT & SECRETARY/TREASURER

ARTICLE VI REGISTERED AGENT

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

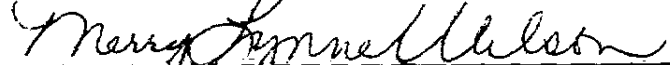
MERRY LYNNE WILSON
2630-B NW 41ST STREET, GAINESVILLE, FL 32606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HENRY J. BROWN, P O BOX 579, CEDAR KEY, FL 32625


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



Date



Signature/Incorporator



Date

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TALLAHASSEE, FLORIDA