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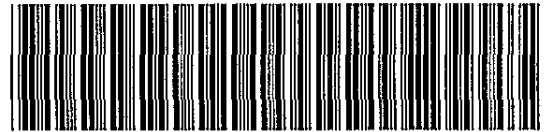
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05 MAY 19 AM 10:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

5/20/05  
BWL

## TRANSMITTAL LETTER

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

SUBJECT: WALKER FARMS INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee  
Certified Copy  
& Certificate

FROM: BENJAMIN T WALKER

Name (printed or typed)

2503 NE SAGE RD

Address

MAYO, FL 32066

City, State & Zip

(386) 294-3532

Daytime Telephone Number

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

# ARTICLES OF INCORPORATION

FILED

05 MAY 19 AM 10:57

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:

**WALKER FARMS INC**

## ARTICLE II PRINCIPAL OFFICE

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

2503 NE SAGE RD  
MAYO, FL 32066

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES PAR VALUE \$1.00

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BARBARA COULTHURST  
172 W MAIN STREET  
MAYO, FL 32066

**ARTICLE V      INCORPORATOR(S)**

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

**(PRESIDENT/TREASURER)**

BENJAMIN T WALKER

2503 NE SAGE RD

MAYO, FL 32066

**(VICE PRESIDENT/SECRETARY)**

CHERI L WALKER

2503 NE SAGE RD

MAYO, FL 32066

**ARTICLE VI      NATURE OF BUSINESS**

The general nature of business of this corporation is to transact any and all lawful business.

The undersigned incorporators have executed these Articles of Incorporation this

17th day of MAY, 2005.

Benjamin T Walker

Signature

Cheri L Walker

Signature

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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: WALKER FARMS INC.

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

BARBARA COULTHURST

(Name)

172 W MAIN STREET

(P.O. Box not acceptable)

MAYO, FL 32066

(City/State/Zip)

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 statute 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.

BE Coulthurst

(Signature)

5/17/05

(Date)