

P06000006658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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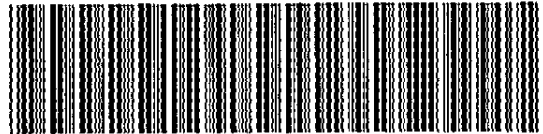
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 JAN 13 PM 1:49

## COVER LETTER

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

SUBJECT: Aqualand Aquarium, 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: Joseph Fisher

Name (Printed or typed)

738 S.E. Albatross Ave

Address

Port St. Lucie, Fl 34983

City, State & Zip

(772) 879-7273

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)

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**ARTICLE I NAME**

The name of the corporation shall be:

Aqualand Aquarium, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

738 S.E. Albatross Ave  
Port St. Lucie, FL 34983

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The sale of tropical fish and supplies

**ARTICLE IV SHARES**

The number of shares of stock is:

400

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

President Daniel Denson, 738 S.E. Albatross Ave. Port St. Lucie, FL 34983  
VP Joseph Fisher 738 S.E. Albatross Ave. Port St Lucie, FL 34983

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Barbara Fisher 738 S.E. Albatross Ave . Port St Lucie, FL 34983

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

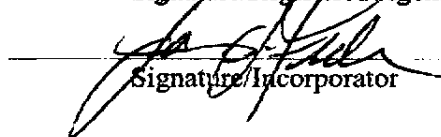
Joseph Fisher 738 S.E. Albatross Ave, Port St Lucie Fl 34983

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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

X   
\_\_\_\_\_  
Signature/Registered Agent

1/10/06  
\_\_\_\_\_  
Date

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

1/10/06  
\_\_\_\_\_  
Date