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| PICK-UP                                 | WAIT               | MAJL                                  |  |  |
| (Business Entity Name)                  |                    |                                       |  |  |
| (Document Number)                       |                    |                                       |  |  |
| Certified Copies                        | _ Certificates     | of Status                             |  |  |
| Special Instructions to Filing Officer: |                    |                                       |  |  |
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OF DEC -1 PM 1: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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VALIDATION

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| <u>11/30/07/</u>            |                        |      | <del>I</del> na       |
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| City State                  | •                      | ZIP  | Phone                 |

#### CORPORATION(S) NAME

Updater

Verifier

Acknowledgment

W.P. Varifier

| Cholaen                    | Lake Mapia, Inc.    |                                       |
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| Profit                     | 4                   | ( ) Adams                             |
| ( ) NonProfit              | ( ) Amendment       | ( ) Merger                            |
| ( ) Foreign                | ( ) Dissolution     | ( ) Mark                              |
| ( ) Limited Partnership    | ( ) Annual Report   | ( ) Other                             |
| ( ) Reinstatement          | ( ) Reservation     | ( ) Change of Registered Agent        |
| Certified Copy of articles | ( ) Photo Copies    | ( ) Certificate Under Seal            |
| ( ) Call When Ready        | ( ) Call If Problem | ( ) After 4:30                        |
| ( ) Will W                 |                     | ( ) Mail Out                          |
| 7                          |                     |                                       |
| Name                       | 7                   |                                       |
| Availability               |                     |                                       |
| Document                   |                     |                                       |
| Examiner                   |                     |                                       |

**ARTICLES OF INCORPORATION** 

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OF

06 DEC -1 PM 1:22

**GOLDEN LAKE TILAPIA, INC.** 

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### **ARTICLE I - NAME**

The name of the Corporation is GOLDEN LAKE TILAPIA, INC.

#### **ARTICLE II - ADDRESS**

The principal office, or mailing address of the Corporation is:
1800 NW 89th Place, Miami, FL 33172

#### **ARTICLE III - DURATION**

This Corporation shall have perpetual existence.

#### **ARTICLE IV - PURPOSE**

The purpose of this Corporation is to engage in the transaction of any and all business permitted under the laws of the United States and of this State.

#### **ARTICLE V - CAPITAL STOCK**

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any time is one thousand (1000) shares of common stock having the par value of One (\$1.00) Dollar.

#### **ARTICLE VI - PREEMPTIVE RIGHTS**

The Corporation elects to have preemptive rights in accordance with the provisions of Florida Statutes Section 607.0603, pursuant to the terms and conditions, if any, prescribed by the board of directors.

#### ARTICLE VII - REGISTERED OFFICE AND AGENT

The initial registered office of this Corporation is 1800 NW 89th Place, Miami, FL 33172.

The initial registered agent at such address is Mary Schiavetta.

#### **ARTICLE VIII - DIRECTORS**

The Corporation shall have one director initially, whose name and street address is as follows:

NAME ADDRESS

Peter Ullrich 1800 NW 90<sup>th</sup> Place

Miami, FL 33172

#### **ARTICLE IX - INCORPORATOR**

The name and street address of the incorporator of this Corporation is as follows:

NAME ADDRESS

Peter Ullrich 1800 NW 90<sup>th</sup> Place Miami, FL 33172

IN WITNESS WHEREOF, the undersigned incorporator has executed the

foregoing Articles of Incorporation this 27 day of November, 200

signature1

SEAL)

# Before me personally appeared Peter Word , to me well known to be the person described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same for the purposes therein expressed. Witness my hand and official seal in the County and State named this day of November, 2006. AMY HERNANDEZ MY COMMISSION #DD439943 EXPIRES: JUN 12, 2009 Bonded through 1st State Insurance My Commission Expires: Multiple 12, 2009 Personally Known OR Produced Identification Type of Identification Produced

### CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091, Florida Statutes, the following is submitted: FIRST, that **GOLDEN LAKE TILAPIA, INC.**, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at 1800 NW 89th Place, Miami, FL 33172, has named **Mary Schiavetta**, located at 1800 NW 89th Place, Miami, FL 33172, as its agent to accept service of process within Florida.

Signature

Title TRESIDE

Date 11/27/06

SECOND, having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Signature \_

Registered Agent)

Date 11/27/