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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: ARTICLES OF INCORPORATION FOR BLUE CRAYFISH  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) CATERING

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: MARY JANE LEWIS  
Name (Printed or typed)

5700 CYPRESS GROVE CIRCLE  
Address

PUNTA GORDA, FL 33982  
City, State & Zip

941-639-1095  
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:

BLUE CRAWFISH  
CATERING CO.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5700 CYPRESS GROVE CIR.  
PUNTA GORDA, FL 33982

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DO BUSINESS ACCORDING TO THE  
LAWS OF FLORIDA

## ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES OF  
\$1 PAR COMMON STOCK

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT P. MAKUCH - PRESIDENT

PETER D. ALUOTTI - VICE PRESIDENT

MARY JANE LEWIS - SECRETARY, TREASURER

ADDRESS: 5700 CYPRESS GROVE CIRCLE  
PUNTA GORDA, FL 33982

## ARTICLE VI REGISTERED AGENT

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

MARY JANE LEWIS  
5700 CYPRESS GROVE CIRCLE  
PUNTA GORDA, FL 33982

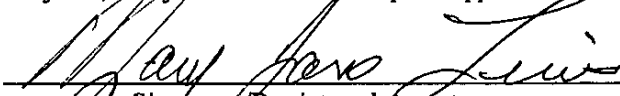

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT P. MAKUCH  
3209 BOHADO PKWY  
CAPE CORAL, FL 33990

\*\*\*\*\*

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

9-5-07  
\_\_\_\_\_  
Date  
9-05-07  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA