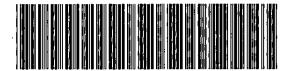
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(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(Boodinonk Hambor)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
<u> </u>			





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12 JAN -6 PH 12: 2: SECRETARY OF STATE

Hanua T. Burch LER T. Burch F.

COVER LETTER

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

SUBJECT: LOFTON CREEK SEAFOOD TO GO, INC.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 \$78.75 \$70.00 \$78.75 Filing Fee Filing Fee, Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: RICKY A. DAVIS Name (Printed or typed) 463179 SR 200 Address **YULEE FL 32097** City, State & Zip 904-271-0171 Daytime Telephone number supsvc0702@yahoo.com
E-mail address: (to be used for future annual report notification)

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 II	PRINCIPAL OFFICE		
	Principal street address	Mailing address, if differe	nt is:
	463179 SR 200		
7	(ULEE, FL 32097		
•			······
RTICLE III		<u> </u>	
	which the corporation is organized is:		~
ANY AND AL	LL LAWFUL PURPOSES.	全所	Ş
		AS A	<u> </u>
		XX	9
		2.7	ÆD ₽¥
		<u> </u>	<u> </u>
RTICLE IV		97	25
he number of sha	res of stock is: 1000	And the second s	25
RTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	01
	itle:RICKY A. DAVIS / PRESIDENT		
Address:	463179 SR 200		
	YULEE FL 32097		
Name and T	Silve MITZLDAVIC / MCE DDECIDE	NT Name and Title:	
Address:	463179 SR 200		
Addiess.	YULEE, FL 32097	Addiess.	·
	TOLLE, 1 L 32037		
			_
	itle:	Name and Title:	
Address:			
	REGISTERED AGENT	A - California distance di consente los	
he <u>name and Flo</u> Name:	orida street address (P.O. Box NOT acceptable JOE D. JEFFERSON		
Address:	5412 MORSE AVE		
Address.	JACKSONVILLE, FL 32244		
	·		
RTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	RICKY A. DAVIS	·· ·	
Address:	463179 SR 200		
	YULEE FL 32097		
aving been nam	ed as registered agent to accept service of pr	cess for the above stated corporation at the po	lace designated in
is certificate, I a	m familiar with and accept the appointment a	registered agent and agree to act in this capaci	ity
	()	4/0/0045	,
	Required Signature/Registered Agent	<u>1/9/2012</u>	Date
	required Signature/Registered Agent		Date
submit this doci	ument and affirm that the facts stated herein	are true. I am aware that the false informati	on submitted in d
ocument to the D	epartment of State constitutes a third degree f	lony as provided for in s.817.155, F.S.	
\ _	۸		
<u> </u>	Required Signature/Incorporator		ZZ/a_