

PI3000027652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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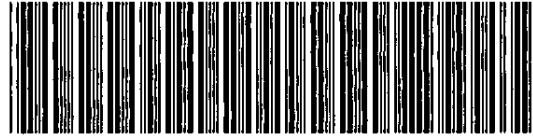
(Business Entity Name)

(Document Number)

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

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13 MAR 25 PM 5:19  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

VH

**COVER LETTER**

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

**SUBJECT: L & L TILAPIA FARM, 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: L & L TILAPIA FARM, INC.**  
Name (Printed or typed)  
**2465 41ST AVENUE N.E.**  
Address  
**NAPLES, FL 34120**  
City, State & Zip  
**239-298-1418**  
Daytime Telephone number  
**navarrofarm@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)

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**ARTICLE I NAME**  
The name of the corporation shall be: L & L TILAPIA FARM, INC.

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**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
2465 41ST AVENUE N.E.

Mailing address, Talieron, Inc.  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

NAPLES, FL 34120

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: AQUACULTURE FARMING

**ARTICLE IV SHARES** 100 (PRESIDENT HOLDS 52%) (VICE PRESIDENT HOLDS 48%)  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title: LORENZO NAVARRO, PRESIDENT

Name and Title: LAZARO MANUEL GIL, VICE PRESIDENT

Address: 2465 41ST AVENUE N.E.

Address: 12351 SW 198TH STREET

NAPLES, FL 34120

MIAMI, FL 33177

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

(cont.)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: LORENZO NAVARRO  
Address: 2465 41ST AVENUE N.E.  
NAPLES, FL 34120

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LORENZO NAVARRO  
Address: 2465 41ST AVENUE N.E.  
NAPLES, FL 34120

*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*



Required Signature/Registered Agent

03/18/2013

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*



Required Signature/Incorporator

03/18/2013

Date