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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M RD  
6/21/13

## COVER LETTER

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

SUBJECT: Skip One Beach, 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: Michael F. Kayusa

Name (Printed or typed)

P.O. Box 2237

Address

Fort Myers, FL 33901

City, State & Zip

239-334-8200

Daytime Telephone number

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 I    NAME**

The name of the corporation shall be: Skip One Beach, Inc

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

17650 San Carlos Blvd  
Ft. Myers Beach, FL 33931

Mailing address, if different is:

17650 San Carlos Blvd  
Ft. Myers Beach, FL 33931

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: Marketing and processing seafood.

**ARTICLE IV    SHARES**

The number of shares of stock is: 100

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

Name and Title: Dennis L. Henderson/ President

Address: 21251 Carter Rd  
Estero, FL 33928

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

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

Name and Title: Ranell S. Henderson/ Vice President

Address: 21251 Carter Rd  
Estero, FL 33928

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

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

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

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

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

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

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(cont.)

Name and Title: \_\_\_\_\_ Name and Title: FILED  
Address: \_\_\_\_\_ Address: 13 JUN 20 PM 1:09  
\_\_\_\_\_  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

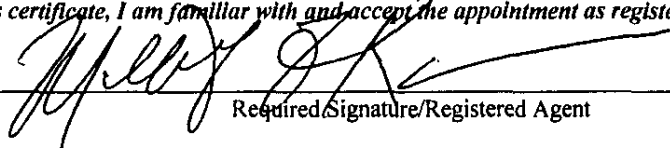
Name: Michael F. Kayusa, Esquire  
Address: 2075 West First Street, Suite 203  
Fort Myers, FL 33901

**ARTICLE VII INCORPORATOR**

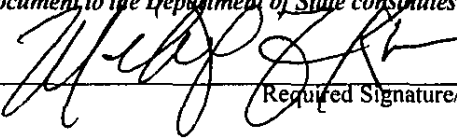
The name and address of the Incorporator is:

Name: Michael F. Kayusa, Esquire  
Address: P.O. Box 2237  
Fort Myers, FL 33902

*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 6-19-13 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 6-19-13 Date