

P/40000/4/04

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

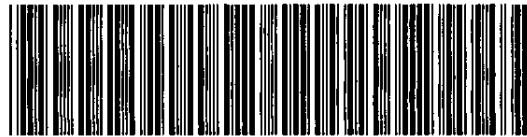
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500256434585

02/10/14--01053--010 **70.00

14 FEB 10 AM 10:36
TALLAHASSEE, FLORIDA

a 02/17/14

COVER LETTER

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

SUBJECT: **LBD SEAFOOD, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **LARRY DUOSE**
Name (Printed or typed)
75077 CLYDE HIGGINBOTHAM ROAD
Address
YULEE, FL 32097
City, State & Zip
912-390-1126
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 I NAME

The name of the corporation shall be: LBD SEAFOOD, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

75077 CLYDE HIGGINBOTHAM ROAD
YULEE FL 32097

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: COMMERCIAL FISHING

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LARRY DUBOSE/PRESIDENT

Name and Title: _____

Address 75077 CLYDE HIGGINBOTHAM ROAD

Address: _____

YULEE FL 32097

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
14 FEB 10 AM 10:35
TALLAHASSEE, FLORIDA

(conti.)

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: JOE D. JEFFERSON
Address: 5412 MORSE AVE.
JACKSONVILLE, FL 32244

RECEIVED
FEB 10 AM 10:36
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: LARRY DUBOSE
Address: 75077 CLYDE HIGGINBOTHAM ROAD
YULEE FL 32097

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

3/7/13
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

3/7/13
Date