

P 15000014378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

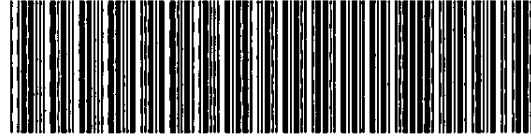
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2/12/15

## COVER LETTER

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

SUBJECT: **Post Your Fish.com. 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: **Katrina Langdon**

Name (Printed or typed)

**1075 NW 6th Avenue**

Address

**Boca Raton, FL 33432**

City, State & Zip

**561-504-9218**

Daytime Telephone number

**katsrival@aol.com**

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 FEB - 5 PM 12: 14

FILED

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 23, 2015

KATRINA LANGDON  
1075 NW 6TH AVENUE  
BOCA RATON, FL 33432

SUBJECT: POST YOUR FISH.COM, INC.  
Ref. Number: W15000004943

We have received your document for POST YOUR FISH.COM, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 915A00001450

FILED

15 FEB -5 PM 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
FEB -5 AM 9:50  
TALLAHASSEE, FLORIDA

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, P.S. (Profit)

**ARTICLE I NAME**  
The name of the corporation shall be: Post Your Fish.com, Inc.

FILED

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address

1075 NW 6th Avenue  
Boca Raton, FL 33432

15 FEB -5 PM 12:14  
Mailing address, if different is:  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: The purpose of the Corporation is to  
engage in any activities or business permitted under the laws of the United  
States and the State of Florida.

**ARTICLE IV SHARES** 1000  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title:	<u>Frank Langdon, President</u>	Name and Title:	_____
Address	<u>1075 NW 6th Avenue</u> <u>Boca Raton, FL 33432</u>	Address:	_____ _____

Name and Title:	<u>Katrina Langdon, Vice-President</u>	Name and Title:	<u>Katrina Langdon, Treasurer</u>
Address	<u>1075 NW 6th Avenue</u> <u>Boca Raton, FL 33432</u>	Address:	<u>1075 NW 6th Avenue</u> <u>Boca Raton, FL 33432</u>

Name and Title:	<u>Roberta Stealy, Secretary</u>	Name and Title:	_____
Address	<u>1011 NW 7th Street</u> <u>Boca Raton, FL 33486</u>	Address:	_____ _____

(cont.)

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: Katrina Langdon  
Address: 1075 NW 6th Avenue  
Boca Raton, FL 33432

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Katrina Langdon  
Address: 1075 NW 6th Avenue  
Boca Raton, FL 33432

*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*

Katrina Langdon  
Required Signature/Registered Agent

2-2-15  
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.*

Katrina Langdon  
Required Signature/Incorporator

2-2-15  
Date

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15 FEB -5 PM 12:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA