

PI5000085955

(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



600277699386

10/15/15--01016--002 **78.75

10/15/15 10:20

15 OCT -9 AM 8:26

mod 10/20

COVER LETTER

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

SUBJECT: Lucky Fish Holdings Co
(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: David Derian
Name (Printed or typed)

1413 Highpoint Ave
Address

Richmond VA 23230
City, State & Zip

954 - 234 - 5677
Daytime Telephone number

DavidDerian@me.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: Lucky Fish Holdings Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

624 old dixie Highway S.W.
Vero Beach Fl. 32962

Same.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Bulk botanical importation
and distribution.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Daniel Derian

Name and Title: _____

Address 3420 pump road 207
Richmond Va.
23233

Address: _____

Name and Title: Michael Fishman

Name and Title: _____

Address 624 old dixie highway S.W.
Vero Beach Fl.
32962

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Michael Fishman

Address: 624 old dixie highway S.W.
Vero Beach Fl. 32962

15 OCT -9 AM 9:26

ARTICLE VII INCORPORATOR

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

Name: Daniel Denon

Address: 3420 Pump Rd #207
Richmond Va. 23223

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Michael Fishman

Required Signature/Registered Agent

10-12-15

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.

Daniel Denon

Required Signature/Incorporator

10-12-15

Date