

11/30/21, 1:37 PM

Division of Corporations

P21000100616

Florida Department of State
Division of Corporations
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To:
Division of Corporations
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Account Number : 104662003400
Phone : (516)935-3940
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: STEWARTMRR@AOL.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
FEEDTHEWALRUS INC**

Certificate of Status	1
Certified Copy	0
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: FEEDTHEWALRUS INC**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address
6445 NE 7TH AVENUE SUITE 204
MIAMI, FL 33138

Mailing address, if different is:

_____**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE

_____**ARTICLE IV SHARES**The number of shares of stock is: 1,500 AT NO PAR VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ADAM JENKINS - PRESIDENT/DIRECTOR

Name and Title: _____

Address 6445 NE 7TH AVENUE SUITE 204
MIAMI, FL 33138

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ADAM JENKINS
Address: 6445 NE 7TH AVENUE SUITE 204
MIAMI, FL 33138

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: ADAM JENKINS
Address: 6445 NE 7TH AVENUE SUITE 204
MIAMI, FL 33138

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 days prior or 90 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

Required Signature/Registered Agent

NOVEMBER 29, 2021

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

NOVEMBER 29, 2021

Date

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