

11/30/21, 11:37:44 AM

Division of Corporations

**Florida Department of State**  
**Division of Corporations**  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
 FEEDTHEWALRUS INC**

Certificate of Status	1
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Help

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**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: 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

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**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ADAM JENKINS - PRESIDENT/DIRECTOR Name and Title: \_\_\_\_\_Address: 6445 NE 7TH AVENUE SUITE 204 Address: \_\_\_\_\_  
MIAMI, FL 33138 \_\_\_\_\_

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 AGENT**

The 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 INCORPORATOR**

The name and address of the Incorporator is:

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

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**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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