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CORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):
1	A A
(Corporation Name)) olani / popument 1)
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	
Walk in Pick up time	(Document #)
	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
	- Indicate of status
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILNGS	REGISTRATION/ QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
Name Reservation	Reinstatement
	Trademark
	Other
CR2E031(9/92)	Examiner's Initials

FIND CENTRE ST (CO 1 100 (G) ATTORNEYS AT LAW . THUST ACCOUNT

RO. BOX 1280 PH. BOAZET-0742

PERNANDHA BEACH. N. 22035-1209 3/22/95 Beth Register 904 489-6013 Please Call if you cannot read the numbers Thank

POOLE & POOLE, P.A.

Attorneys at Law
Suite 200, Allan Building
303 Centre Street
Fernandina Beach, Florida 32034

WESLEY R. POOLE, IR. PRICE POOLE, IR.

FRANCES O. BURGESS, C.L.A.

PLEASE REPLY TO: POST OFFICE BOX 1280 FERNANDINA BEACH, FL 3285-1280 904/261-0742 FAX # 904/261-0745

August 22, 1995

Division of Corporations Post Office Box 6327 Tallahassee, Fl 32314

ATTN: TERRI BUCKLEY

CORPOATE SPECIALIST

RE: WILCOX SHRIMPING, INC.

Dear Ms. Buckley:

Pursuant to my telephone conversations with Beth Register, enclosed are the documents you returned on the above referenced corporation.

Please file this corporation as of August 7, 1995, and let us have your receipt therefore.

Thank you for your assistance in this matter.

Yours sincerely,

Frances G. Burgess, CLA

fgb Enclosures



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 16, 1995

W'ESLEY R. POOLE 363 CENTRE STREET STE 200 FERNANDINA BEACH, FL 32034

SUBJECT: WILCOX SHRIMPING, INC. Ref. Number: W95000016545

We have received your document for WILCOX SHRIMPING, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$122.50.

Please return 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 (904) 487-6878.

Terri Buckley Corporate Specialist

Letter Number: 895A00038479

ARTICLES OF INCORPORATION

<u>OF</u>

WILCOX SHRIMPING, INC.

The undersigned, acting as incorporator under the provisions of the laws of the State of Florida, adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is: WILCOX SHRIMPING, INC.

ARTICLE II. NATURE OF BUSINESS

This corporation is being organized for the transaction of any and all lawful business permitted under the Florida General Corporation Act and the laws of the United States.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of capital stock that the corporation is authorized to issue is FIVE HUNDRED (500) with a par value of ONE DOLLAR (\$1.00) each. All of the shares are of one class only.

ARTICLE IV. TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V. ADDRESS

The initial post office address of the principal office of this corporation is: 1742 Oelsner Road, Fernandina Beach, FL 32034. The Board of Directors may from time to time move the principal office to any other address in Florida.

ARTICLE VI. DIRECTORS

This corporation shall have two directors initially. The number of directors may be increased or diminished from time to time by by-laws adopted by the stockholders, but shall never be

less than one (1).

ARTICLE VII. INITIAL DIRECTORS

The names and post office addresses of the initial directors, who shall hold office for the first year of corporate existence or until their successors are elected or appointed and have qualified are:

DIRECTOR

ADDRESS

ROBERT E. WILCOX, SR.

Post Office Box 1866 Fernandina Beach, FI 32035

FRANCES G. BURGESS

Post Office Box 1866 Fernandina Beach, FL 32035

ARTICLE VIII. OFFICER

The names and post office addresses of the officers who shall hold office for the first year of corporate existence or until their successors are elected or appointed are:

NAME

OFFICE

ADDRESS

ROBERT E. WILCOX, SR. President

ident Post Office Box 1866

Fernandina Beach, FL 32035

FRANCES G. BURGESS

Secretary

Post Office Box 1866

Fernandina Beach, FL 32035

ARTICLE IX. REGISTERED AGENT

The name and address of the initial registered agent of this corporation is: WESLEY R. POOLE, 303 Centre Street, Suite 200, Fernandina Beach, FL 32034.

ARTICLE X. AMENDMENTS

These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a majority of the issued and outstanding stock entitled to vote thereon, unless all the

Directors and all the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made. Each and every action required to be voted upon and thereby approved by the stockholders shall be approved by a majority vote of the stockholders.

EXECUTED this ____ day of August, 1995.

Incorporator: WESLEY R. POOLE
303 Centre Street, Suite 200
Fernandina Beach, FL 32034

By my signature below, I hereby accept appointment as the Designated Registered Agent of this corporation.

WESTEY R. POOLE



PLEASE READ	ALL INS	TRUCTION	IS BEFORE (COMPLET	ING THIS FORM	A	
APPLICATION FOR	FLORIC	ORIDA DEPARTMENT OF STATE Sandra B. Mortham		FILED			
REINSTATEMENT		Secretary of con-		96 DEC 11 AM11: 33			
DOCUMENT # P95000065868				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
WILCOX SHRIMPING, INC.				6000020278465 -12/12/9601097003			
Principal Place of Business Mailing Address				-	****375.0	(i ****375,00	
1742 Oelsner Road Post Office Box Fernandina Beach, Fernandina Beach FL 32034 FL 32035			Box 1866 Beach,	REINSTATEMENT 90			
If above addresses are incorrect in any way, line through incorrect information a 2. New Principal Office Address. If Applicable				DO NOT WRITE IN THIS SPACE			
New Principal Office Address. If Applicable New Mailing Address, If Applicable Suite Apt # etc Suite Apt # etc			oucatile	4 Date incorporated or Qualified To Do Business in Florida August 7, 1995			
Uty & State	City & State	. 110		5 FEI Numbe	Number Applied For		
Zip Gountry	Zip Country			59-3331951 Not Applicable 6 GERYLEGATE OF STATUS DESIDED TO \$8.75 Additional For Engineer			
7. Names and Street Address on of Each Officer and	Dungton (Ele					for a Certificate of Status	
Titlets) Name of Officers and or Directors		Street Address of Each Officer and/or Director Use Post Office Box I	h t	City / S	State / Zip		
P/D ROBERT E. WILCOX,	1742 Oelsner Road		i	Fernandina Beach, FL 32034			
S/D FRANCES G. BURGES:	151 Ibis Court			Fernandina	Beach, FL 32034		
				· · · · · · · · · · · · · · · · · · ·			
					36/2	-11-91p	
B. Name and Address of Current R WESLEY R. POOLE, ESQUIT		ent	Name	9. Name and /	Address of New Registered	Agent (
303 Centre Street, Suite 200 Fernandina Beach, FL 32034			Street Address (F	Street Address (P.O. Box Number is Not Acceptable)			
			Suite, Apt #, Elc	Suite, Apt W. Elc			
City				State Zip Code			
10 I being appointed the registered agent of the above Signature of Registered Agent Wesley R	e named corpo loo distered ag	PRINT MUST SIGN	with and accept the of	bligations of Secti	on 607.0505, F.S. Date/2/9/6	76	
11. Does this corporation pay an Dept. of Revenue under S. 1	ny intang 199.032,	ible tax to Florida Sta	the itutes. Yes	□ No 🗵		de for information	

12 I do herety cently that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Forida Statutes, I release the Division of Corporations from any hability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exemp—in public access. I centry that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reministenement application the reason for dissolition has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all leas owed by the corporation have been guid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: FRANCES G. BURGESS Secretary 12/9/96 (904) 261-2068

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(See other side for information on intangible tax.)

Daytime Phone *