

P96000019039

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
TOLL FREE No. 1-800-342-8062  
FAX (904) 222-1222

No 52504

RE: Direct Sealoff *with 1/1*

96 MAR -4 PH 11:25  
C.C. FEE. DISBURSED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NAME \_\_\_\_\_  
FIRM \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
One Day Service Two Day Service  
To us via \_\_\_\_\_ Return via \_\_\_\_\_  
Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_  
State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

- Capital Express™
- Art. of Inc. File
- Corp. Record Bench
- Ltd. Partnership File
- Foreign Corp. File
- Cert. Copy(s) *Photo*
- Art. of Amend. File
- Dissolution/Withdrawal
- C U S-
- Fictitious Name File
- Name Reservation
- Annual Report/Reinstatement
- Reg. Agent Service
- Document Filing
- Corporate Kit
- Vehicle Search
- Driving Record
- Document Retrieval
- UCC 1 or 3 File
- UCC 11 Search
- UCC 11 Retrieval
- File No.'s, Copies
- Courier Service
- Shipping/Handling
- Phone ( )
- Top Priority
- Express Mail Prep.
- FAX ( ) pgs.

2000001730072  
03/04/96-01083-010  
\*\*\*\*\*70:00-\*\*\*\*\*70:00

96 MAR -4 PH 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBTOTALS \_\_\_\_\_

*PH 3/4/96*

| REQUEST | TAKEN              | CONFIRMED | APPROVED     |
|---------|--------------------|-----------|--------------|
| DATE    | <i>3/4/96</i>      |           |              |
| TIME    | <i>11:00P</i>      |           | CK No. _____ |
| BY      | <i>[Signature]</i> |           |              |

|                                |          |
|--------------------------------|----------|
| FEE.....                       | \$ _____ |
| DISBURSED.....                 | \$ _____ |
| SURCHARGE.....                 | \$ _____ |
| TAX on corporate supplies..... | \$ _____ |
| SUBTOTAL.....                  | \$ _____ |
| PREPAID.....                   | \$ _____ |
| BALANCE DUE.....               | \$ _____ |
|                                | \$ _____ |

WALK-IN Will Pick Up \_\_\_\_\_

Please remit invoice number with payment  
TERMS: NET 10 DAYS FROM INVOICE DATE  
1 1/2% per month on Past Due Amounts

THANK YOU from

**ARTICLES OF INCORPORATION  
OF  
DIRECT SEAFOOD OUTLET, INC.**

**FILED**  
96 MAR -4 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I: CORPORATE NAME:**

The name of this corporation is **DIRECT SEAFOOD OUTLET, INC.**

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and the mailing address of this corporation is 1643 Cypress Avenue, Melbourne, Florida 32935.

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000.

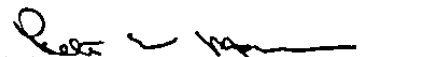
**ARTICLE IV: INITIAL REGISTERED AGENT AND OFFICE**


The name and address of the initial registered agent is PETER E. MANN, residing at 1053 Locust Avenue N.E., Palm Bay, Florida 32907

**ARTICLE V: INCORPORATORS**

The name and street address of the incorporator to these Articles of Incorporation is PETER E. MANN residing at 1053 Locust Avenue N.E., Palm Bay, Florida 32907

The undersigned has executed these Articles of Incorporation on January 26, 1996. Having been designated in the above and foregoing articles as registered agent and incorporator, we hereby accept the positions.

  
\_\_\_\_\_  
PETER E. MANN  
Registered Agent

  
\_\_\_\_\_  
PETER E. MANN  
Incorporator