

P99000024243

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

99 MAR 16 PM 4: 13

Port Richey Shrimp
Docks, Inc

700002808517-6
-03/17/99--01001--025
*****78.75 *****78.75

RECEIVED
99 MAR 16 PM 3: 35
DIVISION OF CORPORATION

- Art of Inc. File
- LTD Partnership File
- Foreign Corp. File
- L.C. File
- Fictitious Name File
- Trade/Service Mark
- Merger File
- Art. of Amend. File
- RA Resignation
- Dissolution / Withdrawal
- Annual Report / Reinstatement
- Cert. Copy
- Photo Copy
- Certificate of Good Standing
- Certificate of Status
- Certificate of Fictitious Name
- Corp Record Search
- Officer Search
- Fictitious Search
- Fictitious Owner Search
- Vehicle Search
- Driving Record
- UCC 1 or 3 File
- UCC 11 Search
- UCC 11 Retrieval
- Courier

Signature _____

Requested by: cy 3/16 2:51
Name Date Time

Walk-In _____ Will Pick Up _____

H. Purinton MAR 16 1999

ARTICLES OF INCORPORATION

Port Richey Shrimp Docks, Inc
(Name of Corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Port Richey Shrimp Docks, Inc.

ARTICLE II - DURATION

The corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The Corporation is authorized to issue one thousand shares (1000) of one Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

Name: Port Richey Shrimp Docks, Inc.
Address: 6641 Clark Street
City: Hudson Florida Zip 34667

The name and street address of the Initial Registered Agent of this Corporation is:

Name: John J. Franklin, Jr.
Address: 5329 Moongate Rd.
City: Spring Hill Florida Zip 34606

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially. The number of directors may be either increased or diminished from time to time by the Bylaws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

Name: William J. Sakelson
Address: 7150 Park Dr.
City: New Port Richey State: FL Zip: 34652
Name: Walter Horton
Address: 6641 Clark Street
City: Hudson State: FL Zip: 34667

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 16 PM 4:13

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Port Pechey Shrimp Docks, Inc.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 5329 Moongate RD.

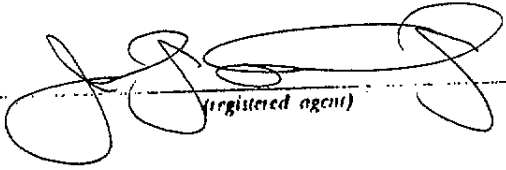
Spring Hill, FL 34606

has named John J. Franklin, Jr.

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

X 
(registered agent)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
99 MAR 16 PM 5:13

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

Name: John J. Franklin, Jr.
 Address: 5329 Moongate Rd
 City: Spring Hill State: FL Zip: 34606

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 15th day of March, 19 99.

[Signature] (seal)
 _____ (seal)
 _____ (seal)

STATE OF FLORIDA)
) SS
 COUNTY OF HERNANDO)

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

[Signature]

 Signature

 Signature

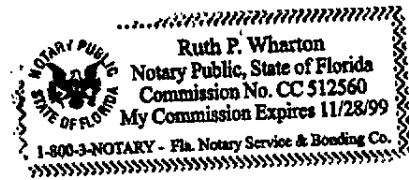
FL Dr. Lic. FL52-472-54-450-0

 Form of Identification

 Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that John J. Franklin Jr executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath (was) (was not) taken.

Witness my hand and official seal in the County and State last aforesaid this 15th day of MARCH 1999



[Signature]

 Notary Signature

 Printed Notary Signature