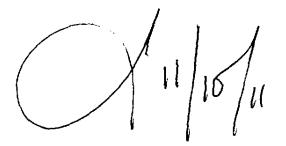
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Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				

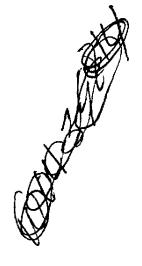
Office Use Only





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SECRETIZED F STATE

# TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Taste	of Europe, Inc.		
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original	inal and one (1) copy of the artic	les of incorporation and	a check for:
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Malgorzata Swiderska Name (	Printed or typed)	
-	219 Cypress Trace	ddress	
-	Royal Palm Beach, FL 33411 City, State & Zip		
-	561-204-1908	elephone number	

NOTE: Please provide the original and one copy of the articles.



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

TOTIVED

04 MW 10 /M II: 09

October 29, 2004

MALGORZATA SWIDERSKA 219 CYPRESS TRACE ROYAL PALM BEACH, FL 33411

SUBJECT: TASTE OF EUROPE, INC.

Ref. Number: W04000039814

We have received your document for TASTE OF EUROPE, INC.. However, the document has not been filed and is being returned for the following:

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of 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 (850) 245-6934.

Loria Poole Document Specialist New Filings Section

Letter Number: 104A00062344

# 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:

Taste of Europe, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5700 South Dixie Hwy. West Palm Beach, FL 33-405

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Deli and ethnic store



### ARTICLE IV SHARES

The number of shares of stock is:

The numbers of shares of stock that this corporation is authorized to have outstanding at any time is: 100

## INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Malgorzata Swiderska 219 Cypress Trace Royal Palm Beach, FL 33411 Registered Agent

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

MALGORZATA SWIDERSKA 219 Cypress Trace

Royal Palm Beach, FL 33411

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Malgorzata Swiderska 219 Cypress Trace Royal Palm Beach, FL 33411

Having been named as	registered agent to accep	t service of process for the a	sbove stated corporation	at the place designated in this
certificate, I am familia	with and accept the appo	ointment as registered agent (	and agree to act in this co	apacity
			) ~	• •

Signature/Registered Agent

10/20/04

Date

Signature/Incorporator

Date

10/20/04