

P 97000073309

TRANSMITTAL LETTER

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

SUBJECT: 1 LATURE'S BEST PRODUCE, U.S.A., INC.
(Proposed corporate name - must include suffix)

400002260364--7
-08/07797--01028--014
****122.50 ****122.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

John W. Holmes
Name (Printed or typed)

2211 Cherokee Trail
Address

Valrico, FL 33594
City, State & Zip

813-654-2486
Daytime Telephone number

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

97 AUG 25 AM 10:00

FILED

W 97-18258

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

T.M. - 8/1/97, 8/25/97



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

August 8, 1997

JOHN W. HOLMES
2211 CHEROKEE TR
VALRICO, FL 33594

SUBJECT: NATURE'S BEST PRODUCE, U.S.A., INC.
Ref. Number: W97000018258

We have received your document for NATURE'S BEST PRODUCE, U.S.A., INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

The registered agent must sign accepting the designation.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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) 487-6926.

Tracy Meyer
Document Specialist

Letter Number: 297A00040223

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Nature's Best Produce, U.S.A., Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3623 Lithia Pinecrest Rd.

Valrico, FL 33594

Mailing address: P. O. Box 2850, Brandon, FL 33509-2850

ARTICLE III SHARES

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

Ten (10)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

John W. Holmes

3623 Lithia Pinecrest Rd.

Valrico, FL 33594

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

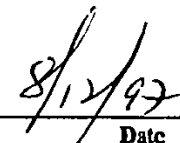
John W. Holmes

2211 Cherokee Trail

Valrico, FL 33594



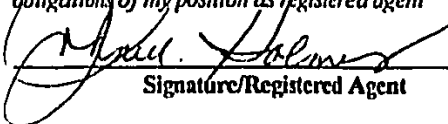
Signature/Incorporator



Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent



Date

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

97 AUG 25 AM 10:00

FILED