



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 3, 2000

DIANE EDWARDS
P.O. BOX 1201
LADY LAKE, FL 32158-1201

SUBJECT: SISTER'S HARVEST PRODUCE BARN, INC.
Ref. Number: W00000000109

We have received your document for SISTER'S HARVEST PRODUCE BARN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

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) 487-6878.

Alan Crum
Document Specialist

Letter Number: 800A00000132

**Articles of Incorporation
of
Sister's Harvest Produce Barn, Inc.**

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporates and submit these articles of Incorporation for the purpose of forming a for-profit corporation.

**I.
Name**

The name of the Corporation is Sister's Harvest Produce Barn, Inc., hereinafter referred to as the "Corporation".

**II.
Purposes**

The purpose of the Corporation is to transact any and all lawful business under the laws of the United States and Florida; including but not limited to the sale of produce.

**III.
Principal Office and Registered Agent**

The principal office of the Corporation is 8780 E. County Hwy. 466, Oxford, Florida 34484. The Corporation may maintain offices and/or transact business at other locations, either within or without the State of Florida. The name and address of the registered agent for service of process upon the Corporation is Diane Edwards,

39526 Carolina ave.
Lady Lake FL 32159

**IV.
Duration**

The duration of the Corporation shall be perpetual.

**V.
Initial Business**

The initial business of the Corporation shall be: Sale of produce.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VI.
Capital Stock

The Corporation is authorized to issue only one class of share of stock which shall be designated Common Stock. The total number of shares the Corporation shall have authority to issue is one hundred (100) each share to have a par value of \$1.00.

VII.
Incorporators

The names and mailing addresses of the incorporators are:

| <u>Incorporator Name</u> | <u>Incorporator Address</u> |
|---|---|
| Diane Edwards President, Secretary/Treasurer | P.O. Box 1201, Lady Lake, FL 32158-1201 |
| Cheryl Chiodo Vice-President | 1845 Lake Ella Road, Fruitland Park, FL 34731 |

VIII.
Directors

The number of directors constituting the initial Board of Directors of the Corporation is: two (2). The name(s) and address(es) of the person(s) who is/are appointed to act as the initial director(s) of the Corporation is/are:

| <u>Director Name</u> | <u>Director Address</u> |
|-----------------------------|---|
| Diane Edwards | P.O. Box 1201, Lady Lake, FL 32158-1201 |
| Cheryl Chiodo | 1845 Lake Ella Road, Fruitland Park, FL 34731 |

IX.
No Personal Liability

The private property of the stockholders shall not be subject to the payment of corporate debts.

X.
Operating Provisions

The provisions for the operation, regulations, and management of the business and internal affairs of the Corporation shall be as set forth in the Bylaws, which may be amended from time to time by a majority vote of a quorum of the Board of Directors.

XI
Fiscal Year

The Fiscal year of the Corporation shall be from January 1 to December 31 of each year.

IN WITNESS WHEREOF, we have hereunto set our hands and seals on this _____ day of _____, 1999.

X Kenneth D. Chiodo
[Signature]
[Signature]
[Signature]

Witnesses as to all Incorporators
Signatures and to Registered
Agent signature

Diane Edwards
Diane Edwards

Cheryl Chiodo
Cheryl Chiodo

Diane Edwards

REGISTERED AGENT

State of Florida

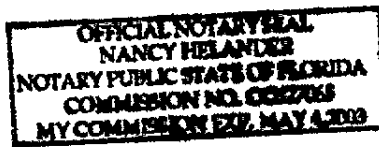
County of Lake

BEFORE ME, the undersigned authority, on this day personally appeared DIANE EDWARDS, known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.

SUBSCRIBED AND SWORN TO BEFORE ME, this 23rd day of DEC, 1999.

Nancy Helander
Notary Public in and for the
State of Florida

My Commission Expires:



State of Florida

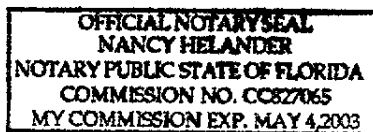
County of Lake

BEFORE ME, the undersigned authority, on this day personally appeared Cheryl Chiodo, known to me to be the person described in, and whose name is subscribed to the foregoing document, who on oath stated to me that he/she executed the same for the purposes and consideration therein expressed.

SUBSCRIBED AND SWORN TO BEFORE ME, this 23rd day of DEC, 1999.

Nancy Helander
Notary Public in and for the
State of Florida

My Commission Expires:



CERTIFICATE OF DESIGNATION
OF
REGISTERED OFFICE AND REGISTERED AGENT

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 517.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is Sister's Harvest Produce Barn, Inc.
2. The name and address of the registered agent and office is:

DIANE EDWARDS
39526 CAROLINA AVE.
LADY LAKE, FL 32159

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 of registered agent

Diane Edwards

DIANE EDWARDS

Date of signature: 12-23-99