

P 000000 11835

TRANSMITTAL LETTER

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

FILED
00 JAN 31 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT:

Golden Enterprises, Inc.

(Proposed corporate name - must include suffix)

000003116155--N
-01/31/00--01094--010
*****87.50 *****87.50

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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

JOEL GOLDEN

Name (Printed or typed)

422 North 7th Street

Address

LANTANA, FLORIDA 33462

City, State & Zip

561-547-1048

Daytime Telephone number

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

F. O'NEILL

FEB 3 1999

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:

GOLDEN ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

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

422 North 7th Street, LANTANA, FL 33462

ARTICLE III SHARES

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

100 - ONE HUNDRED

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOEL GOLDEN
422 North 7th St.
LANTANA, FL 33462

ARTICLE V INCORPORATOR

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

JOEL GOLDEN
422 North 7th St.
LANTANA, FL 33462


Signature/Incorporator

1/29/00
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

1/29/00
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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