Department of State

Division of Corporati P. O. Box 6327 Tallahassee, FL 3233							
·			0003285 <b>7</b> : -06/12/00011 *****87.50 *	647 35009 ****87.50			
_SUBJECT:/\/_	EW VORK DOU (PROPOSED CORPORAT	GH INC . TE NAME – <u>MUST INCLU</u>	DE SUFFIX)				
				·			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$87,56							
☐ \$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				
			a	•			
		ADDITIONAL COR	Status PY REQUIRED				
FROM:	FRANK ROBE Name (Pr		PY REQUIRED				
FROM:	Name (Pr	RT PLASTING inted or typed)  RiDGE DR.S.	PY REQUIRED				
FROM:	Name (Pr	RT PLASTIN inted or typed)  RIDGE DR.S.  address	PY REQUIRED	Congress			
FROM:	Name (Pr  S814 NORTH)  A  NAPLES FLOR  City, 5	RT PLASTIN inted or typed)  RIDGE PR.S.  Address	PY REQUIRED	H.			

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



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 16, 2000

FRANK ROBERT PLASTINI 5814 NORTHRIDGE DR. S. NAPLES, FL 34110

SUBJECT: NEW YORK DOUGH INC.

Ref. Number: W00000015356

We have received your document for NEW YORK DOUGH INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

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) 487-6933.

Letter Number: 900A00034444

Teresa Brown Corporate Specialist

Disting a Commentation of DON 6297 Tollahagaaa Florida 39314

ARŢICLES (	OF INCORPORA	TION			
. In compliance w	OF INCORPORA ith Chapter 607 and/o	r Chapter 621, F.S.	(Profit)		
	r	, , , , , , , , , , , , , , , , , , , ,	()		OJUN29 PH 2:5
ARTICLE I	<u>NAME</u>		, —	_	
I he name of the c	corporation shall be:	Vew York I	ough, Inc	0 ہے ۔0	OJUN 29 PM 2:50 HASSEE, FLORIDA
-	•	5814 Nor	thridge D	$C \rightarrow S_{C}$	10N29
		Nagles E	28/110	1427	PA 2
		Makies,	L 34110	<b>~</b> 4	445 1 VASSIVIA
ARTICLE II	PRINCIPAL OF	<u> ICE</u>		1 ~ (	= "SEE, E, STAZ
i ne principal plac	e of business/mailing a	ddress is: 5210	Northr	idge Dr.	J LORINE
		JO.		24.110	"UA
		Nas	Northr	24110	
475			4		
ARTICLE III	<u>PURPOSE</u>		•		
ine purpose for v	which the corporation	is organized is: 🔽	read Dis	stributor	
		C	,, (22, 14		
4700000 m	·	#			- ·
ARTICLE IV	SHARES (	1/20 000	oor v	alue	
The number of sha	rres of stock is:		ĭ		
470					
ARTICLE V	INITIAL OFFICER	S/DIRECTORS (	optional)		
The name(s) and	address(es): $$	Frank Rol 5814 No Naples, F	and Place	tini	
	7	rank Rov	Jerr 1 103		
		5814 No	rthridge		
		Nagles, F	7 3	£ 110	
		1 south 100 1			
ARTICLE VI	DECICTEDEN	A CITATO			10
The name and Flo	REGISTERED orida street address re	AGENT	- 1. Q-1	and Plas	stini
	2 roa ser cet address re	Signer or affect is: t	rank ro	OCT , , , , ,	7. (
		C	5814 No	thridge	DI · D
		· ·			34110
		Ţ	5814 Non Japles,		
ADTICI IN THE	THOODROD 4 TO		,		
ARTICLE VII	INCORPORATO	<u>R</u> .	<b>~</b> 1 1	~\`\`\`	٠.
THE HAINE AND ACC	iress of the Incorporate	ris: Frank	Robert Northri	Plastin	\\ <del>_</del>
		P011	11 - 11	las Dr.	5
		2814	MOLANIL		
		Mao	les, FL	34110	
******	******	1 10/4		_	
Having been named as	repistered agent to accer-	ママママママママママママ   camina	F=====================================	******	*****
certificate, I am familia	registered agent to accept ar with and accept the appo	service of process for t intment as registered as	ne above stated corporate	oration at the place o	designated in this
		as registered as	ાન લાગ <b>લ</b> કારક 10 act 1	n unus capacity	
Went 1	There	: =		, , .	_·
Signature /D and	d A compt			6/8/00	<del></del>
Signature/Registered	u Agent			Date/	
	1//				

Signature/Incorporator