

PO0000080717

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

700003365537--7
-08/21/00--01063--009
*****78.75 *****78.75

SUBJECT: FLORIDA KITCHEN DISTRIBUTORS, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: ROSE ZOLLER
Name (Printed or typed)

1489 NORTH MILITARY TRAIL # 217
Address

WEST PALM BEACH, FL. 33409
City, State & Zip

561-616-4434
Daytime Telephone number

00 AUG 21 PM 1:20
FEDERAL
STATE
TALLAHASSEE
FLORIDA

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

T BROWN AUG 25 2000

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:

FLORIDA KITCHEN DISTRIBUTORS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1489 NORTH MILITARY TRAIL, SUITE 217
WEST PALM BEACH, FL. 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO CONDUCT ANY AND ALL BUSINESS
TRANSACTIONS.

ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED SHARES.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ROSE ZOLLER, 1489 N. MILITARY TRAIL, #217 W.P.B. FL. 33409
OMAH SINGH 1489 N. MILITARY TRAIL, #217, W.P.B. FL. 33409

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

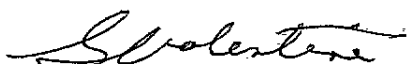
GERALD VALENTINE
1489 NORTH MILITARY TRAIL, SUITE 217,
WEST PALM BEACH, FLORIDA. 33409

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROSE ZOLLER, 1489 N. MILITARY TRAIL, #217 W.P.B. FL. 33409

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8-16-00

Date



Signature/Incorporator

8/16/00

Date

FILED
00 AUG 21 PM 1:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA