## P00000082315

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 DO AUG 28 PM 2: 04
SECREMASSEE FLORID

SUBJECT: CHILLY WILLYSICE & TREATS CO.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy	y of the articles of incorporation and a check for:
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\$70.00

\$78.75

Filing Fee Filing Fee & Certificate of Status

□ \$78.75

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Filing Fee

\$87.50 Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	Guill	ERMO Name (Prin	HU6	ETE"	00003: -08/28.	375 /000	144- 1112-0 ******	:3 20 0 75
	1500	S. OCE					कक्कक्ष	o.;;

POMPANO BEACH FL 33062

City, State & Zip

954-240-5483

Daytime Telephone number

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

JB,30

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
in compliance with Chapter 667 and 61 and
ARTICLE I NAME
The name of the corporation shall be:
OF FIRE ETPRATE CO
CHILLY WILLYSTOREAM TREATS CO
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
706 W.BOYNTON BEACH BLUD
TOG W. DOYNTON DEADLE
BOYNTON BEACH, FL. 33428
APTICIE III PURPOSE
The purpose for which the corporation is organized is:
$\mathcal{L}_{\mathcal{L}}}}}}}}}}$
NEW BUSINESS ICE CREAM STORE
ICE CREAM STORE
ARTICLE IV SHARES
The number of shares of stock is: 100
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s) and address(es):
GUILLERMO HUETTE 1500 S. OCEAN BLVD#508 DOMPANO BOH F
C. 15 GOVE C. 33062
SIMONE GOEBEL
1500 S. OCEAN BLND #508 POMPANO BCH FL
33062
ARTICLE VI REGISTERED AGENT
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:
$\sim$ . $\sim$
SIMONE GOEBEL & HOS
ISOD S. OCEAN BLYD #508
POMPANO BCH FL 33062
ARTICLE VII INCORPORATOR
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
SIMONE GIOEBEL
1300 3. WEAR 10013
POMPAND BEACH FL 33060
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Having been named as registered agent to accept service by proceedings and agree to act in this capacity certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
$\sim$
HU9 25 10000
Signature/Registered Agent Date
Arg 25/2000
Signature/Incorporator Date