## POIOSS 27424

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

MAR 16 AM III

SECRETARY OF STATE

AND AHASSEE FLORE

SUBJECT:

CAPE COAST DISTRIBUTORS, INC.

| Enclosed is an origina  | al and one(1) copy of the article          | s of incorporation and a                           | check for :  |  |  |
|---|--|--|--|--|--|
| □ \$70.00<br>Filing Fee   | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | □ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |  |  |
| FROM: MICHAEL GEORGE BOUKEdES  Name (Printed or typed)                      |  |  |  |  |  |
| 1518 Minustenen Csuy #19  Address  Cocoa Beach, FL 32931  City, State & Zip |  |  |  |  |  |
|   |  |  |  |  |  |
|   | •  | 544-2397   | ,  |  |  |

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

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|---|--|
| 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:   |  |
| CAPE COAST DISTRIBUTORS, INC.   |  |
| ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  1518 MINUTEMEN CSWY #9  COCOA BENCH FL 32931  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Doing Business | FI<br>01 MAR<br>SECRETA<br>TALLAHAS                          |
| ARTICLE IV SHARES The number of shares of stock is: /OO   | FILED  MAR 16 MIT: 44  ECRETARY OF STATE ALLAHASSEE, FLORIDA |
| ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):  MICHAEL 6. Boukedes   | OF 44  |
| MICHAEL 6. BOUKEDES 1518 MINUTEMEN CSWY \$19  COCOA BEACH, FL 32931   |  |
| ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:  |  |
| MICHAEL G. BOUKEDES 1518 MINUTEMEN COWY #19 COCOA BEACH, HL 32931   |  |
| ARTICLE VII INCORPORATOR  |  |
| The name and address of the Incorporator is:  MICHAEL 6. BOUKEDES  1518 MINUTEMEN CSWY #19  COCOA BEACH, FL 32931   |  |
| **************************************  | t the place designated in this                               |

Signature/Registered Agent

Date

7

Signature/Incorporator

Date