

P010000072370

TRANSMITTAL LETTER

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

700004433047--3
-06/20/01--01086--012
*****125.00 *****78.75

SUBJECT: ALPHA 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUL 23 AM 9:45

FILED

FROM:

Yomi SALU
Name (Printed or typed)

3430 NW 52nd Ave Suite 301
Address

Lauderdale Lakes, FL 33309
City, State & Zip

6/22/01 - out of town → 954 - 677 - 3054
Daytime Telephone number
9:45am.

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

D. WHITE 24 July 2001 3✓



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 22, 2001

YOMI SALU
3430 NW 52 AVE, STE 301
LAUDERDALE LAKES, FL 33319

SUBJECT: ALPHA DISTRIBUTORS INC.
Ref. Number: W01000014478

We have received your document for ALPHA DISTRIBUTORS INC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 487-6052.

Dale White
Document Specialist
New Filings Section

Letter Number: 501A00037936

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:

Alpha Wine DISTRIBUTORS Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3430 NW 52ND Ave, Suite 301
Lauderdale Lakes, FL 33319

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WINE DISTRIBUTION

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

FILED
01 JUL 23 AM 9:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Paul A. Stone
3430 NW 52 Ave Suite #301
Lauderdale Lakes, FL 33319

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

YOMI SALU
1330 HATCHER LOOP DRIVE
BRANDON, FL 33511

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

Paul Stone

Signature/Registered Agent

7/3/01

Date

Yomi Salu

Signature/Incorporator

6-18-2001

Date