

TRANSMITTAL LETTER

P01000077145

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

SUBJECT: LATITUDE 44, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

4000004478094--4
-07/16/01--01115--015
*****70.00 *****70.00

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: LYNN WILSON, CPA
Name (Printed or typed)

901 AVE "S" S.E.

Address

WINTER HAVEN, FL. 33880

City, State & Zip

(863) 299-3701

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE FLORIDA

01 AUG - 7 AM 8:24

FILED

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

T. Burch AUG 7 2001



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 18, 2001

LYNN WILSON, CPA
901 AVE "S" S.E.
WINTER HAVEN, FL 33880

SUBJECT: G&M, INC.
Ref. Number: W01000016487

We have received your document for G&M, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date can be no more than 90 days after the date of filing.

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.

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) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 601A00042020

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:

LATTITUDE 44, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2420 HARTRIDGE PT WINTER HAVEN, FL 33881

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL FOOD SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

VIVIAN R. GREGORY
2420 HARTRIDGE PT WINTER HAVEN, FL. 33881

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LYNN WILSON, CPA
901 AVE "S" SE WINTER HAVEN, FL 33880-

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

Vivian Gregory
Signature/Registered Agent

7-12-01
Date

L. Wilson, CPA
Signature/Incorporator

7/9/01
Date

FILED
01 AUG -7 AM 8:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA