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TRANSMITTAL LETTER

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

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-09/18/01--01006--004
*****87.50 *****87.50

SUBJECT: MANGO ISLAND ICE CO.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: KRISTINA K. McLAIN
Name (Printed or typed)

11200 PURPLE PLUM CT.
Address

ORLANDO FL 32821
City, State & Zip

407 238 1355
Daytime Telephone number

FILED
01 SEP 17 AM 10:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

2 Saw
9/19/01

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

01 SEP 17 AM 10:49

ARTICLE I NAME

The name of the corporation shall be:

MANGO ISLAND ICE C

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11206 PURPLE PLUM CT.
ORLANDO, FL 32821

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

500 COMMON SHARES WITH A PAR VALUE OF \$100.00

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

KRISTINA K. McLAIN; PRESIDENT, VICE PRESIDENT, SECRETARY, TREASURER
11206 PURPLE PLUM CT.
ORLANDO, FL 32821

ARTICLE VI REGISTERED AGENT

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

KRISTINA K. McLAIN
11206 PURPLE PLUM CT.
ORLANDO FL 32821

PH. 407-238-1355

Kristina K. McLain

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KRISTINA K. McLAIN
11206 PURPLE PLUM CT.
ORLANDO FL 32821

Kristina K. McLain

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

Kristina K. McLain
Signature/Registered Agent

9-11-01

Date

Kristina K. McLain
Signature/Incorporator

9-11-01

Date