

PO1000093042
TRANSMITTAL LETTER

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
409 EAST GAINES STREET
TALLAHASSEE, FL 32399

100004603271--9
-09/20/01--01092--002
*****78.75 *****78.75

S & J CARIBBEAN FOOD SERVICES, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

ENCLOSED IS AN ORIGINAL AND ONE (1) COPY OF THE ARTICLES OF INCORPORATION
AND A CHECK FOR:

SEVENTY EIGHT DOLLARS AND SEVENTY FIVE CENTS (\$78.75)
FILING FEE & CERTIFICATE

FROM: SARA L. DE LEON, PRESIDENT
JESSICA SANCHEZ, VICE PRESIDENT
NAME (PRINTED OR TYPED)

617 GULL DRIVE
ADDRESS

KISSIMMEE, FLORIDA 34759
CITY, STATE & ZIP CODE

863.427.2468
DAYTIME TELEPHONE NUMBER

FILED
01 SEP 20 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 9/24/07

FILED

01 SEP 20 AM 11:15

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

S & J CARIBBEAN FOOD SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

617 GULL DRIVE
KISSIMMEE, FLORIDA 34759

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED (500) PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

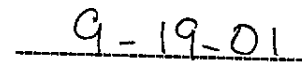
JESSICA SANCHEZ, VICE PRESIDENT
617 GULL DRIVE
KISSIMMEE, FLORIDA 34759

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

SARA I. DE LEON, PRESIDENT
617 GULL DRIVE
KISSIMMEE, FLORIDA 34759



Signature/Incorporator


Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/Registered Agent


Date