TRANSMITTAL LETTER

P020000002690

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



SUBJECT:

(Proposed corporate name - must include suffix)

600004761956--8 -01/09/02--01025--008 *****87.50 *****87.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

☐ \$70.00

□ \$78.75

Filing Fee Filing Fee

& Certificate of Status

□\$78.75

E \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: I in othy E. Name (Printed or typed)

JAN -9 AN H: 2"

4171 Howard Circle

Marianna, F. 30446 City, State & Zip

850-594-1268

Daytime Telephone number

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

CP/AN

ARTICLES OF INCORPORATION

of

m°Coy's Foo	name of corporation)	Fnc.	
The undersigned acting as the incorporators of a the following articles of incorporation for such corporation for such corporation.	corporation under the Fl	orida Business Corporation	Act, adopt(s)
ARTICI The name of the corporation is:	LE I - CORPORATE NAI	ME L	GZ JAN -9 SECRETAR
m° Coy's Food	1 mort	Fue:	
•	TICLE II - DURATION	rida law.	II: 37
AR	TICLE III - PURPOSE		
The corporation is organized for the purpose of e United States and the State of Florida.	engaging in any activities	s or business permitted unde	er the laws of the
The corporation is authorized to issue	- INITIAL PRINCIPAL (OFFICE	O per share.
STREET ADDRESS 2823 Joffers	ion street		
	. ,	-	
CITY Marianna	FLORIDA	ZIP	32448
Mailing address, if different	=		
STREET ADDRESS			. =
CITY	FLORIDA	ZIP	
ARTICLE VI - INITIA	L REGISTERED OFF	FICE AND AGENT	
The street address of the initial registered of	fice and the name of the	he initial registered agent	at the office is:
NAME Timothy Earl M	1°C0y		
ADDRESS 4171 Howard	arcle		
CITY	FLORIDA	ZIP	3-446

ARTICLE VII - INITIAL BOARD OF DIRECTORS

NAME Timothy Earl ADDRESS 4171 Howard Circ		
	le.	_
CITY Manana		ZIP 32446
NAME		
ADDRESS	-	
CITY	STATE	ZIP
NAME		
ADDRESS	2	
CITY	STATE	ZIP
ARTICLE V	VIII - INCORPORATORS	
he names and addresses of the incorporators signing the		ows:
TIMOTHY ROLL ITT	<u> </u>	
ADDRESS 4171 Howard Circ	_	ZIP 32446
CITY Marianna	STATE Florida	ZIF 3-44(6
NAME		<u> </u>
ADDRESS	OMATE	
CITY	STATE	ZIP
NAME		·
ADDRESS		CID
CITY	STATE	ZIP
The undersigned incorporator(s) have executed these	se Articles of Incorporation this	one
lay of <u>Sanuary</u>		a e a more o
_		3.1/
_	Cinolly 67	(Signature)
	<i>U</i> .	
		(Signature)
		(5181.414.5)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

mc Coy Food Mart, Fre, (name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 4171 Howard Creek

has named Timothy Earl McCoy
located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

Cinothy Carl Weboy Ban. 9th 2002
(Signature) (Date)