

TRANSMITTAL LETTER

Department of State
Division of Corporation
P. O. Box 927
Tallahassee, FL 323

P02000109036

SUBJECT: SUNSHINE PROCESSING INC
(Proposed corporate name - must include suffix)

400008278464--2
-10/09/02--01004--016
*****78.75 *****78.75

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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: JAGJIT S. (JACK) ROSHA
Name (Printed or typed)

7081 NW 21 ST
Address

SUNRISE FL 33313
City, State & Zip

954-747-9499
Daytime Telephone number

02 OCT -8 PM 2:05
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

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.

ARTICLE I NAME

The name of the corporation shall be:

SUNSHINE PROCESSING INC

ARTICLE II PRINCIPAL OFFICE

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

7081 NW 21st SUNRISE FL 33313

MAILING ADDRESS 1802 N. UNIVERSITY DR PLANTATION

ARTICLE III SHARES

FLORIDA 33322

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JAGJIT S. (JACK) ROSHA

7081 NW 21st SUNRISE FL 33313

ARTICLE V INCORPORATOR

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

JAGJIT S. ROSHA (JACK)

7081 NW 21st

SUNRISE FL 33313

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