

PO3000019591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

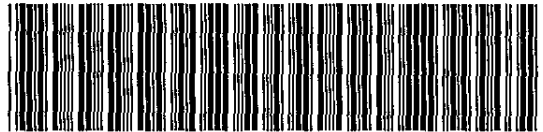
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 FEB 14 AM 10:25

R. G. ROSSER FEB 14 2003

TRANSMITTAL LETTER

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

SUBJECT: FILIPE'S SAUSAGE COMPANY INC.
(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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ILDA FILIPE
Name (Printed or typed)

16 WHITE HURST LANE
Address

PALM COAST, FL 32164
City, State & Zip

(386) 446-8843
Daytime Telephone number

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

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:

FILIPE'S SAUSAGE COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

16 WHITE HURST LANE
PALM COAST, FL 32164

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WHOLESALE MARKETING OF SAUSAGE

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ILDA FILIPE, PRESIDENT
16 WHITE HURST LANE
PALM COAST, FL 32164

ARTICLE VI REGISTERED AGENT

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

ILDA FILIPE
16 WHITE HURST LANE
PALM COAST, FL 32164

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ILDA FILIPE
16 WHITE HURST LANE
PALM COAST, FL 32164

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

Ilida N. Filipe

Signature/Registered Agent

2/12/03

Date

Ilida N. Filipe

Signature/Incorporator

2/12/03

Date

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