

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

unique catering services inc.



Certificate of Status	O
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ARTICLES O	F INCORPORA	03.000[9]93 T ION	• • • • • • • •
(4)	of	,	03 MAY 12 PH 3: 3
Unique Caterina S	ecvices:	Inc.	SECRETARY OF STAT
· (name	e of corporation)		• ,
The undersigned subscriber(s) to these Articles of Incorporation under the laws of the State of Florida.	poration, natural person	n(s) competent to	contract, hereby form #
	· CORPORATE NAME		
The name of the corporation is:	Patering .	Secvice	S Inc
ARTICL	E II - DURATION		
This corporation shall exist perpetually unless dissolved	according to Florids is		
ARTICL	E III - PURPOSE		
The corporation is organized for the purpose of engaging United States and the State of Florida.	g in any activities or bu	siness permitted u	inder the laws of the
ARTICLE I	V- CAPITAL STOCK		
The corporation is authorized to issue / 000 Dollar(s) (\$	shares (/00 k, which shall be design	g) of <u>Olve.</u> nated "Common S	dallar (1)
ARTICLE V - INITIAL RE	GISTERED OFFICE A	ND AGENT	
The street address of the Initial Registered Agent office t	and the name of the Init	ial Registered Ag	ent at that office is:
NAME Deligh Francois ADDRESS 450 N.E. 1785+			
om North Miam Beach	FLORIDA		ZIP 33(62
The principal office, if known, or the mailing address of	the corporation is:		
NAME Unique Caterina Son	vices In	c	
ADDRESS 450 N.E. 17834			
CITY North Man Beach	FLORIDA		zp 33162
		Dr	illy Business Review - 07/94

HO2000191936 508-51-100

AKTICLE VI - INI	HAL BOARD OF DIRECTORS	•
This corporation shall have 100 (directors initially. The ner	mber of directors may be either
increased or diminished from time to time by the By-L	aws, but shall never be less than or	ne (1). The names and addresses
of the initial director(s) of the corporation are as follow	/s:	
NAME DellaLFrançois		
ADDRESS 450 DE. 13857		
CITY NUB	STATE F	zur 33/62-
NAME Francis "Francais		
ADDRESS 450 NE. CAST		
CITY NMB	STATE FI	zir 33162
NAME		
ADDRESS		
CTTY	STATE	zir
		· · · · · · · · · · · · · · · · · · ·
ARTICLE V	'I I - INCORPORATORS	•
The names and addresses of the incorporators signing t	hese Articles of Incorporation are	as follows:
NAME Deligitroncois		
ADDRESS 450 N.E. 1185+		
CITY North Migni Beach	STATE FI	zn 33/60.
NAME Francis K. Francois		
ADDRESS 450 N.E. 178st		
cor North Miani Beach	STATE F	zm33162.
NAME		
ADDRESS		
GTY	STATE	ZIP
, , , , , , , , , , , , , , , , , , ,		
IN WITNESS WHEREOF, the undersigned subscriber	to b bassa accompand these deficies at	Incompanio this
day of May 2003	sy nate excesses gless filteries of	incorporation this
	Dr. Mar	
	Aldra L Fin	MCOLO_(Scal)
	Frank F	Hora Do
•	Thomas F.	(Cult Cult)
		(Seal)

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POTOL P. DA

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HU3000 PAM392 PM 3: 3:

CERTIFICATE AND KNOWLEDGEMENT AHASSEE FLORIDA
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

Unique Cotering Services Inc.

Pursuant to Florida Statutos Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

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has		_	L. Fo					,
		•	iress, as its Re	-		accept ser	vice of pr	ocess within
thi	s state.							

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

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