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STATE
TALLAHASSEE, FLORIDA

CB 8-25

TRANSMITTAL LETTER

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

SUBJECT: Potant Potables 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Randall M. Schwartz

Name (Printed or typed)

3444 Rosefield Dr.

Address

Holiday, Fl 34691

City, State & Zip

(727) 938-4385

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:

Potent Potables Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4607 Mile Stretch Dr. Holiday Fl 34690 / 3444 Rosefield Dr. Holiday Fl 34691-1736

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To do business under Florida law. Operating Bar/Restaurant, Retail Shop & Axillaries.

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares at \$0.50 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Randall M. Schwartz 3444 Rosefield Dr Holiday Fl 34691 Presedent

Jason D. Craig 3444 Rosefield Dr. Holiday, FL 34691 Vice Presedent.

Vivian C. Schwartz 3438 Rosefield Dr. Holiday Fl 34691 Sec.Tres.

ARTICLE VI REGISTERED AGENT

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

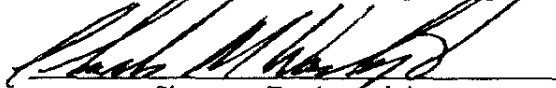
Chuck Washington 2451 Atwell Ct. New Port Richey, Fl 34655

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Randall M. Schwartz 3444 Rosefield Dr. Holiday, Fl 34691

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



Signature/Registered Agent

8/20/03

Date



Signature/Incorporator

8/20/03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA