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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Swelling Pality)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



000021838380

07/30/03--01017--007 **78.75

ENSURE FILED STATE STATE OF CORPORATIONS OF CORPORATIONS



TRANSMITTAL LETTER

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

SUBJECT: Seaside Vending Corp. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
(PROPOSED CORPORAT	TE NAME – <u>MOST INCLUDE SUFFIX</u>)		
Enclosed are an original and one (1) copy of the artic	les 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: Leslie Kogan Name (Printed or typed)			
135 Swar Ave Address			
Plantation, FL 33324 City, State & Zip			
954-452-3666			
Leslie A. Kogan 135 Swan Avenue Plantation, FL 33324	date 7/28/03 63-643/670		
Seventy Eight and 79xx	Amont of State \$ 7825 dollars @ ===		
WACHOVIA BANK, N.A. Pomparto, FL 33063 for SA CAP	Laut		
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

RECEIVED
03 OCT 10 AH ID: 27

SECREMAN CONTATE
TALLAHASSEE, FLORIDA

August 4, 2003

LESLIE KOGAN 135 SWAN AVE. PLANTATION, FL 33324

SUBJECT: SEASIDE VENDING CORP.

Ref. Number: W03000021963

We have received your document for SEASIDE VENDING CORP, and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham Document Specialist New Filings Section

Letter Number: 303A00044698

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) SECRETARY OF STATE CIVISION OF CORPORATIONS	
The name of the corporation shall be: - 03 0CT 10 PM 3: 09	
Seaside Vending Corp.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
151 N. Nob Hill Rd. #162	
Plantation, FL 33324	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
The purpose for which the corporation is organized is: Become registered by the state of Florida to expand business	
ARTICLE IV SHARES	
The number of shares of stock is:	
100 One Hundred	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Jared Michael Waltzer, President	
151 N Nob Hill Rd. #162	
Plantation, FC -33324	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Jared Wattzer	
151 N. NOD HILL RD #162	-
Plantation, FC 33324	-
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Jared Wultzer	
151 N. Nob Hill Rd #162	
Plantation, FC 33324	
**********************************	***
Having been named as registered agent to accept service of process for the above stated corporation at the place designated certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	n this
AR - 1-20-03	
Signature/Registered Agent Date	
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7-28-03	٠.
Signature/Incorporator Date	<u>.</u>