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TRANSMITTAL LETTER

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2003 NOV 13 AM 11:19

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

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

SUBJECT: ADIS GROCERY, INC.

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 of Status & Certified Copy**

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

FROM:

**ADIS GROCERY, INC.
Name (Printed or typed)**

**2102 N ARMENIA AVENUE
Address**

**TAMPA, FL 33607
City, State & Zip**

TAMPA, FL 33614

**(813) 875-2849
Daytime Telephone number**

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

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TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporation, 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:

ADIS GROCERY, INC.

ARTICLE II PRINCIPAL OFFICE

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

**2102 N. ARMENIA AVENUE
TAMPA, FL 33607**

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

**NELSON CAPORICE
C/O ALBANO & ASSOCIATES
1506 E. MARTIN L. KING BLVD.
TAMPA, FL 33610
(813) 247-2060**

ARTICLE V INCORPORATOR

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

**TSEGAI A. TADESSE
733 PROVIDENCE TRACE CR.
BRANDON, FL 33511
(813)651-1698**



Signature/Incorporator

November 1, 2003

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

November 1, 2003

Date

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TALLAHASSEE FLORIDA