

P04000076072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900033715999

05/11/04 -- 01057 -- 009 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 MAY 11 A 8:56 PM

FILED

2004 MAY 11 AM 11:31

RECEIVED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Chills + Frills Twistee
Treat, Inc.*

Signature _____

Requested by: WL

Date 5/11

Time 11:00

Name _____

Walk-In _____

Will Pick Up _____

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- _____ Photo Copy _____
- ☒ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

**ARTICLES OF INCORPORATION
OF
CHILLS & FRILLS TWISTEE TREAT, INC.**

FILED
2004 MAY 11 A 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE I
NAME**

The name of the corporation is CHILLS & FRILLS TWISTEE TREAT, INC. ("Corporation"). The address of the Corporation is 5994 Seminole Boulevard, Seminole, Florida 33772.

**ARTICLE II
DURATION**

The Corporation shall have perpetual existence.

**ARTICLE III
PURPOSE**

The Corporation is organized to engage for the following purposes: to engage in the business of selling food, beverage and ice cream related products; to engage in any activity or business incidental to or related to the above purpose; to acquire and hold stock in any corporation; to engage in joint ventures and partnerships, as a limited or general partner; to acquire, own, hold, manage, mortgage, improve, lease, sell, exchange, transfer, and otherwise deal with real, personal and intangible property wherever situate; to carry out the said purposes in any state, territory, district, or possession of the United States or foreign country.

**ARTICLE IV
CAPITAL STOCK**

The Corporation is authorized to issue 7500 shares of capital stock of the par value of One Dollar (\$1.00) per share which shall be designated "Common Shares", and all of which shall have the same rights and privileges.

**ARTICLE V
PRE-EMPTIVE RIGHTS**

Every shareholder, upon the sale for cash of any new stock of the Corporation of the same kind, class or series as that which he clearly already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE VI
INITIAL REGISTERED OFFICE AND AGENT**

The street address of the registered agent of the Corporation in the State of Florida is 711 W. Fletcher Avenue, Suite B, Tampa, Florida 33612, and the name of the initial Registered Agent of the Corporation at that address is D. Michael Lins, Esquire.

**ARTICLE VII
INITIAL BOARD OF DIRECTORS**

The Corporation shall have two (2) directors initially. The number of Directors may be either increased or diminished from time to time by the Bylaws. The names and addresses of the initial Directors of the Corporation are:

Lesley Silva
819 9th Street N.E.
Ruskin, Florida 33570

Shirley Anderson
18004 Bill Taylor Road
Lithia, Florida 33547

**ARTICLE VIII
INCORPORATOR**

The name and address of the person signing these Articles of Incorporation is Lesley Silva, 819 9th Street N.E., Ruskin, Florida 33570.

**ARTICLE IX
BYLAWS**

The power to adopt, alter, amend or repeal the Bylaws shall be vested in the Board of Directors and the shareholders.

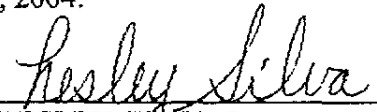
**ARTICLE X
INDEMNIFICATION**

The Corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

**ARTICLE XI
AMENDMENT**

The Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation at Tampa, Florida, this 7th day of May, 2004.

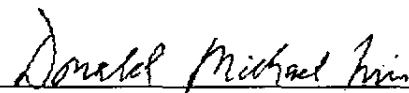


LESLEY SILVA, Incorporator

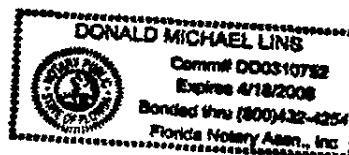
STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Lesley Silva, who executed the foregoing Articles, and she acknowledged before me that she executed those Articles. She is (☒) personally known to me or () produced _____ as identification.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 7th day of May, 2004.



NOTARY PUBLIC, STATE OF FLORIDA
Print Name: Donald Michael Lins
My Commission Expires: _____



CERTIFICATE DESIGNATING REGISTERED AGENT

In pursuance of Chapter 48.091 and Chapter 607.0501, Florida Statutes, the following is submitted in compliance with said Act:

That CHILLS & FRILLS TWISTEE TREAT, INC., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, at 5994 Seminole Boulevard, Seminole, Florida 33772, has named D. Michael Lins, Esquire, located at 711 W. Fletcher Avenue, Suite B, Tampa, Florida 33612, as its agent to accept service of process within this state.

ACKNOWLEDGMENT: Having been named registered agent to accept service of process for the above-stated Corporation, at the place designated in this Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to the proper and complete performance of my duties, and I accept the duties and obligations of Chapter 607.0501, Florida Statutes.

By: _____

D. MICHAEL LINS, Registered Agent

Date: May 7, 2004

FILED
2004 MAY 11 A 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA