

P04000106425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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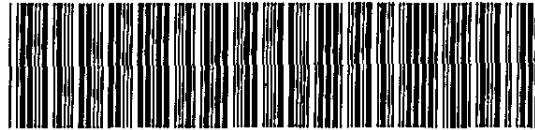
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRET  
DIVISION  
04 JUL 14 PM 4:03

2/19

## TRANSMITTAL LETTER

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

SUBJECT: CARIBBEAN FLAVA GROCERY Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

FROM:

TRECEA LAWRENCE - GRANVILLE  
Name (Printed or typed)

6016 North 40<sup>th</sup> Street Suite B  
Address

TAMPA FLORIDA 33610  
City, State & Zip

813-298-7268  
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)

SECRETARY OF STATE  
DIVISION OF CORPORATE AND  
NON-PROFIT ORGANIZATIONS  
04 JUL 14 PM 4:08

**ARTICLE I NAME**

The name of the corporation shall be:

CARIBBEAN FLAVA GROCERY INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6016 North 40th St Suite B  
TAMPA FLORIDA 33618

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

GROCERY / CONVENIENCE STORE

**ARTICLE IV SHARES**

The number of shares of stock is:

TWO

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

CHRISTOPHER MCLEAN (owner)  
6016 North 40th Street Suite B  
TAMPA FLORIDA 33610

(CO-owner)  
TRECIA LAWRENCE-GRANVILLE  
6016 North 40th Street  
Suite B  
Tampa FLORIDA 33610

**ARTICLE VI REGISTERED AGENT**

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

TRECIA LAWRENCE-GRANVILLE  
6016 North 40th Street Suite B  
TAMPA FLORIDA 33610

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

CHRISTOPHER MCLEAN  
6016 North 40th Street Suite B  
TAMPA FLORIDA 33610

\*\*\*\*\*

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

Trecia Lawrence-Granville

Signature/Registered Agent

7-09-04

Date

C. McLean

Signature/Incorporator

7-09-04

Date