P04000115823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 AUG -5 PM 3:57

TRANSMITTAL LETTER

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

SUBJECT: Frozen Paradise Incorporated
(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 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: Samuel T. Wright
Name (Printed or typed)

607 Grand St
Address

Orlando, FL 32805
City, State & Zip

407-872-0061
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)

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DIVISION OF CORPORATIONS
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ARTICLE I NAME
THE NAME OF THE CORPORATION SHALL BE:

FROZEN PARADISE INCORPORATED.

ARTICLE II PRINCIPAL OFFICE
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

FROZEN PARADISE, Inc.
607 GRAND ST.
ORLANDO, FL 32805

ARTICLE III PURPOSE
THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS:

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS TO MARKET FROZEN BEVERAGES.

ARTICLE IV SHARES
THE NUMBER OF SHARES OF STOCK IS:

ONE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
LIST NAME(S), ADDRESS(ES) AND SPECIFIC TITLE(S):

SAMUEL THOMAS WRIGHT, DIRECTOR
607 GRAND ST.
ORLANDO, FL 32805

STELLA WRIGHT-PERRY, ASSISTANT DIRECTOR
2229 LEE STREET
BRUNSWICK, GA 31520

ARTICLE VI REGISTERED AGENT
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:

Samuel Thomas Wright
607 GRAND Street
ORLANDO, FL 32805

ARTICLE VII INCORPORATOR
THE **NAME AND ADDRESS** OF THE INCORPORATOR IS:

Samuel Thomas Wright
607 GRAND Street
ORLANDO, FL 32805

****

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Samuel Wright
SIGNATURE/INCORPORATOR / REGISTERED AGENT

7-21-04
DATE

7-21-04
DATE