

PO4000124591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

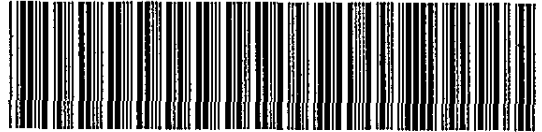
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 AUG 27 PM 1:16

TRANSMITTAL LETTER

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

SUBJECT: Nationwide Distributors Grocery, Inc.

(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: Billie Tamove

Name (Printed or typed)

PO Box 23536

Address

Fort Lauderdale, FL 33307

City, State & Zip

954-229-1984

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)

ARTICLE I NAME

The name of the corporation shall be:

National Distributors Grocery, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3301 Cabaret Lane
Margate, FL 33063

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
all legal transactions under the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Steven Leeman
3301 Cabaret Lane
Margate, FL 33063

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Billie Tamove, Attorney
2142 NE 58th Street
Fort Lauderdale, FL 33308

ARTICLE VII INCORPORATOR

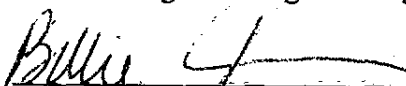
The name and address of the Incorporator is:

Billie Tamove, Attorney
PO Box 23536
Fort Lauderdale, FL 33307

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


Signature/Registered Agent

8/23/04
Date


Signature/Incorporator

8/23/04
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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