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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filina Officer:	
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Office Use Only



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COLLILION.

TRANSMITTAL LETTER

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

SUBJECT: A COT LES CONFORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Day & Lynette Boaila
Name (Printed or typed)

14422 Doodfield Circle S.

Address

Jacksonville, FL 32258
City, State & Zip

904-268-6638

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: Prother Cup Inc.			
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 14422 Woodfield Circle South Jacksonville, FL 32258			
The purpose for which the corporation is organized is: To Sell and distribute Coffeet Tea products to outlets			
ARTICLE IV SHARES The number of shares of stock is:			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Lyne He Bon: lla Dwner Tay Bon: lla Dwner 14422 Woodfield Liccle South Julksonville FL. 32288	I _A	σ.	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	LLAHASSEE, I	04 NOV 17 PM 1:	FLE
Lynette Bonilla 14422 Woodfield Circle South Jacksonville, Fl 32258 ARTICLE VII INCORPORATOR The name and address of the Incompressor is:	OF STATE E. FLORID,	PH 1: 35	Ü
The name and address of the Incorporator is: Jay Bonilla Lynette Bonilla 14422 Wood field Circle South Jacksonville, FL 32258 ***********************************	************	****	
Having been named as registered agent to accept service of process for the above stated corporation at the place certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	designated	in this	
Limeth Banilla /1/03/0 Signature/Registered Agent Date	4		
Lynette Boulle Jay Bonilla 11/00/0 Signature/Incorporator Date	7 4		