

P05000025748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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05 FEB 18 PM 1:38

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

05 FEB 18 PM 1:23

DIVISION OF BUSINESS REGISTRATION

## TRANSMITTAL LETTER

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

SUBJECT: Florida Beverage Solutions 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: Anthony J. Smith  
Name (Printed or typed)

PO Box 10343  
Address

Tallahassee, FL 32302  
City, State & Zip

850-251-9021  
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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**ARTICLE I NAME**

The name of the corporation shall be:

Florida Beverage Solutions INC. SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

PO Box 10343 Tallahassee, FL 32302

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Alcoholic Beverage & Tobacco Consulting and Investigation

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Anthony J. Smith, PO Box 10343  
Tallahassee, FL 32302

**ARTICLE VI REGISTERED AGENT**

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

~~Anthony J. Smith~~  
3510 Bankhead Rd Tallahassee FL 32309

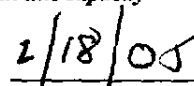
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

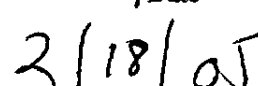
Anthony J. Smith  
PO Box 10343 Tallahassee, FL 32302

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date