

PO50001102306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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**COVER LETTER**

2005 DEC 12 AM 9:23

TALLAHASSEE FLORIDA

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

**SUBJECT: Southern State's Produce Distributor, 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: Santo R. Licamara

Name (Printed or typed)

PO Box 542722

Address

Lake Worth, FL 33454-2722

City, State & Zip

954-610-1950

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:

Southern State's Produce Distributor, Inc.

2005 DEC 12 AM 9:23

STATE  
TALLAHASSEE FLORIDA

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

PO Box 542722  
Lake Worth, FL 33454-2722

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Produce broker and wholesale

### **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):

Santo R. Licamara  
PO Box 542722  
Lake Worth, FL 33454-2722  
President

### **ARTICLE VI REGISTERED AGENT**

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

Santo R. Licamara  
5225 Prairie Dunes Village Circle  
Lake Worth, FL 33463

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Santo R. Licamara  
PO Box 542722  
Lake Worth, FL 33454-2722

\*\*\*\*\*

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

X Santo R. Licamara  
Signature/Registered Agent

12/5/05

Date

X Santo R. Licamara  
Signature/Incorporator

12/5/05

Date