

PO6000015642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

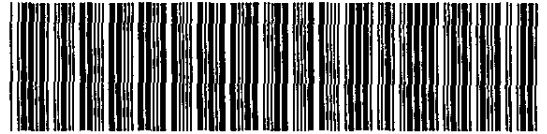
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 02 2006

**COVER LETTER**

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

**SUBJECT:** Chandos Foods, 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:** Beryl N. Stokes, III

Name (Printed or typed)

1318 Bowman St.

Address

Clermont, FL 34711

City, State & Zip

(352)243-5700

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FL 32314

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**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:

Chandos Foods, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

239 Curtis Ave.  
Groveland, FL 34736

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Any and all lawful business specifically restaurant

**ARTICLE IV SHARES**

The number of shares of stock is:  
1000

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

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

David Stevens, President      Kristine Stevens, Sec/Treasurer  
239 Curtis Ave.                      239 Curtis Ave.  
Groveland, FL 34736                Groveland, FL 34736

**ARTICLE VI REGISTERED AGENT**

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

Beryl N. Stokes, III  
1318 Bowman St.  
Clermont, FL 34711


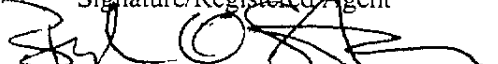
**ARTICLE VII INCORPORATOR**

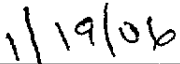
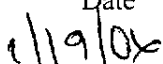
The **name and address** of the Incorporator is:

Beryl N. Stokes, III  
1318 Bowman St.  
Clermont, FL 34711

\*\*\*\*\*

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

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date

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