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SECRETARY OF STATE

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# TRANSMITTAL LETTER

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

SUBJECT:

Golden Harvest Fruit Sales, Inc. P.O. Box 2549 Fort Pierce, FL 34954

Enclosed are an original and one (1) copy of the articles of incorporation and a checkflory

Filing Fee: \$35.00 Registered Agent Fee: \$35.00

Certified Copy: \$ 8.75

Total: \$78.75

# **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Corrected Articles for Document # N06000002549

Already Paid \$78.75

SUBJECT: GOLDEN HARVEST FRUIT SALES, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

Filing Fee Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: MICHELE MARSHALL		
32801 NORTH HIGHW	Printed or typed)  AY 441 LOT 171  ddress	<u> </u>
OKEECHOBEE, FL 349	172 State & Zip	
(772) 461-6669 Daytime Te	elephone 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:

GOLDEN HARVEST FRUIT SALES, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

498 MAPLE AVE, FORT PIERCE, FL 34982

P.O. BOX 2549, FORT PIERCE, FL 34954

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CITRUS FRUIT SALES

### ARTICLE IV SHARES

The number of shares of stock is: 1,000

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michele Marshall

32801 North Highway 441

Lot 171

Okeechobee, FL 34972

President / Director

James W. Marshall

32801 North Highway 441

Lot 171

Okeechobee, FL 34972

Vice President / Director

Dianna L. Bass 8686 Andrews Ave Fort Pierce, FL 34945 Secretary / Director SECRET D. Bass Ave Forterierce FL 34945
Treasurer Director CRID

# ARTICLE VI REGISTERED AGENT

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

Michele Marshall 32801 North Highway 441 Lot 171 Okeechobee, FL 34972

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michele Marshall 32801 North Highway 441 Lot 171 Okeechobee, FL 34972

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

Michele Manshall

Signature/Registered Agent

MARCH 15, 2006

Date

MARCH 15, 2006

Date