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| (Re | questor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

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

| SUBJECT: | D'EleGANT DIPPOPOSED CORPORA | ING Struces | INC | | |
|--------------------------------------|---|-----------------------------|--|--|--|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCLU</u> | DESUFFIX) | | |
| | | | | | |
| Enclosed are an orig | ginal and one (1) copy of the arti | cles of incorporation and | a check for: | | |
| S70.00 | \$78.75 | ☐ \$78.75 | ∑ \$87.50 | | |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, | | |
| Thing I cc | & Certificate of Status | & Certified Copy | Certified Copy | | |
| | | | & Certificate of | | |
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| | ADDITIONAL COPY REQUIRED | | | | |
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| EDOM | Double 1.1 New | 1 55 | | | |
| FROM. | DOUALD W. NETT | (Printed or typed) | | | |
| | | | | | |
| | 1315 RODMAN 51. | | | | |
| • | | | | | |
| Hollywood Fl 33019 City, State & Zip | | | | | |
| City, State & Zip | | | | | |
| | (0~11) > | mn 11772 | | | |
| | Daylime T | celephone number | · | | |
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| S. C. Carlotte | ्राप्त हुन्छ। इत्यान संस्थान स्थापिकाम | | 248 3 m2 | | |
| * * * * * | | • | | | |

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 1. NAME The name of the corporation shall be: | |
| D'ElEGANT DIPPING SAUCES, I | wc. |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | |
| 1315 RODMAW St. | |
| HOLYWOOD, FI 33019 ARTICLE III PURPOSE The purpose for which the corporation is organized is: | |
| SAUCES FOR SALE | SE SE |
| ARTICLE IV SHARES The number of shares of stock is: | FILED AN 30 PM 3. 1 |
| | THE PLANTS |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 |
| DONALD W. NETTLES | |
| LINDA M. JUSO | |
| 1315 RODMAN St. | · . |
| HOLYWOOD FL 33DIG | |
| The name and Florida street address (P.O. Box NOT acceptable) of the reg | pistered agent is: |
| DONKIS W HETILES | |
| 1315 RODMAN St. | * ** |
| ARTICLE VII INCORPORATOR | |
| The name and address of the Incorporator is: | |
| DONALD W. NETTLES | |
| 1315 RODMAN St. | |
| 1-614WOOD, Fl 33019 | \$ |
| Having been named as registered agent to accept service of process for the above stated of | orporation at the place designated in thi |
| certificate, I am familiar with and accept the appointment as registered agent and agree to a | act in this capacity |
| Wall W | May 27 1W6 |
| Signature Registered Agent | Date Date |
| Wall W L | MAY 27 2006 |
| Signature/Incorporator | Date |