

P06000115190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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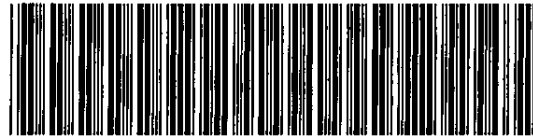
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers SEP 06 2006

W06-34968

COVER LETTER

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

SUBJECT: Destin/Ft. Walton Beach Restaurant Meal Delivery Service 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: Michael Finley
Name (Printed or typed)
760 9th Ave
Address
Crestview, Fl 32536
City, State & Zip
(850) 423 0590
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Destin/Ft. Walton Beach Restaurant Meal Delivery Service Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

760 9th Ave. Crestview, Fl 32536

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

200 Shares of stock will be issued

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Finley 760 9th Ave Crestview, Fl 32536 CEO/President
Diana Finley 760 9th Ave Crestview, Fl 32536 Director of Operations

ARTICLE VI REGISTERED AGENT

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

N/A Michael Finley 760 9th Ave Crestview, Fl 32536

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:



Michael Finley 760 9th Ave Crestview, Fl 32536

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

	08/06/06
Signature/Registered Agent	Date
	08/06/06
Signature/Incorporator	Date