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COVER LETTER

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

SUBJECT:	GORIZ CARPORA	B's In	Contraction of the Contraction o	
Enclosed are an orig	inal and one (1) copy of the arti		UDE SUFFIX) I a check for:	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	BERSON Name	CAREACI (Printed or typed)	<u></u>	
-	MAM City,	Address State & Zip	25	
305 244 - 0855 Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

in compnance with Chapter out and/or Chapter 021, F.S	. (Pront)	
ARTICLE I NAME	· ·	
The name of the corporation shall be:		
GORILLA B'S INC		
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:		
3314 SW 127 CT.		
MINAMI FC 33/75 ARTICLE III PURPOSE	•	66 1 C
The purpose for which the corporation is organized is:		
Sale of prepochaged food item	rS.	PILED 96 PPI-5 PH I: IL
ARTICLE IV SHARES		
The number of shares of stock is:		Ş ə
100		-
ARTICLE V INITIAL OFFICERS AND/OR DI List name(s), address(es) and specific title(s):	RECTORS	
ARTURO DIAZ IR PRESIDEN	IT	
BENSON CAMEAGA - VIGE PAESI	DENT	
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box NOT acc	eptable) of the registered	agent is:
BENSON CANEAGA		
3314 SW 187 CT.		
MIAMI, FL 33175		
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:		
BERSON CAREAGA		
33145W 127CT		
MIAMU FC 33/75		,
Having been named as registered agent to accept service of process certificate, I am familiar with and accept the appointment as registered.		
1/4	, -	. /
1/ Selson freak		1//3/ 1/
/ 		
Signature/Registered Agent		Date
Signature/Registered Agent		Date 11/3/0/