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(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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COVER LETTER

Registration Section

TO:

Division of C	orporations	/		
SUBJECT:	tealthy 1	Jeli, Fi	Ω C	
	(Name of Resulting	ng Florida Profit Corporatio	n)	-
			and fees are submitted tion" in accordance with	
Please return all corre	espondence concernin	g this matter to:		
Vecous	(Contact Person)		SECH TALL	ر 2007
_ Health	(Firm/Company)		VHAS	IAN -3
1318 No	H Monro	est.	SEE.FLO	70
Tallahasse	e FL City, State and Zip Code)	32303	RIDA	2: 20
For further information	on concerning this ma	tter, please call:		
Vecous W	ait	at (\$50) 2	22 1927	
(Name of Cor	ntact Person)	(Area Code and Day	ytime Telephone Number)	-
Enclosed is a check f	or the following amou	int:		
\$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	\$113.75 Filing Fees and Certified Copy	\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS	S:	MAILING A	ADDRESS:	
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to

5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)
Signature: (Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.)
Printed Name: Vecocis Waite Title: Secretary

Fees:

Certificate of Conversion:

\$35.00

Fees for Florida Articles of Incorporation:

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

Certified Copy: Certificate of Status:

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Healthy Deli, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1318 N. Mouroe st.

Tallulussee FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The general nature of the business to be transacted by this conficuation is any and all businesses permitted under the laws of the Restaurant, Deli and grocery

The number of charge of stack in

The number of shares of stock is:

1,000 shares of common stock at \$1.00 par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Loretta Waite P. 5200 ochlockonee Kd Tallahasse FL 32303

Brenda, owusu V.P. 196 Bayle View Drive Tallahussee FL 32311 Vecous Maite 5. Drop Ochlockonee Rd Tallahussee FL 32303

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

Vecous Waite

5200 ochlakomee Rd Tallahussee FL 32303

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ARTICLE VII	INCORPORATOR			
The name and add	ress of the Incorporator is:			• •,
Vecous	waite	1		
5200	ochlockonee	Rd.	Tallahasse	e FL 32303
******	********	******	*******	*****
	s registered agent to accept se icate, I am familiar with and ac			
Jeff.	X			1/03/07
Signature	Registered Agent		•	Dåte
			01	103/07
Signature	/Incorporator			Date