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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

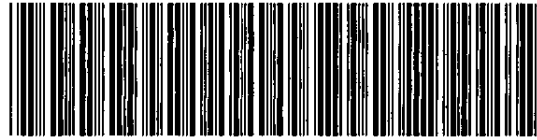
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/23/07--01034--002 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 MAY 23 AM 10:07

APPROVED
AND
FILED

B. McKnight MAY 24 2007

COVER LETTER

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

SUBJECT: CINTRON BEVERAGE DISTRIBUTORS 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 GARRETT
Name (Printed or typed)

6222 CLARITY COURT
Address

SARASOTA, FL 34240
City, State & Zip

941 400 9417
Daytime Telephone 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:

CINTRON BEVERAGE DISTRIBUTORS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6222 CLARITY COURT
SARASOTA, FL 34240

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL PURPOSE

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):

KEITH GROSEBECK DIRECTOR
MICHAEL GARRETT DIRECTOR

ARTICLE VI REGISTERED AGENT

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

KEITH GROSEBECK
6222 CLARITY COURT
SARASOTA, FL 34240

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL GARRETT, J.D.
6222 CLARITY COURT
SARASOTA, FL 34241

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

Signature/Incorporator

Date

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 MAY 23 AM 10:07

APPROVED
AND
FILED