# P07000108545

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

Office Use Only



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AFFHOLE AND EC

## **COVER LETTER**

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

SUBJECT:	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL COPY REQUIRED		
FROM:		DULDING		
-	Namo	(Printed or typed)		
	155 REVERE DRIVE, SUITE 10			
	Audress			
	NORTHBROOK, IL 60062			
	City	, State & Zip		
	847-291-4161			
	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:

# CRYSTAL BEVERAGE, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1800 SECOND ST., SUITE 758 SARASOTA, FL 34236

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
THE TRANSACTION OF ANY OR ALL LAWFUL BUSINESS FOR WHICH
CORPORATIONS MAY BE INCORPORATED IN THE STATE OF FLORIDA

#### ARTICLE IV SHARES

The number of shares of stock is:

100,000,000

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

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#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: DR. HARVEY ALTHOLTZ 1800 SECOND ST., SUITE 758 SARASOTA, FL 34236

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: DR. HARVEY ALTHOLTZ 1800 SECOND ST., SUITE 758 SARASOTA, FL 34236

SECRETARIL OF STATE