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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**ANNIE'S KITCHEN, INC.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 02      |
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Electronic Filing Menu

Corporate Filing Menu

Help

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1/25

## 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 :

ANNIE'S KITCHEN, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is :

3591 N. ANDREWS AVE # 4D

OAKLAND PARK, FLORIDA 33309

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:

2500 COMMON SHARES PAR VALUE \$25.00

### ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

#### PRESIDENT:

SONIA R. GARDNER

3591 N. ANDREWS AVE #4D

OAKLAND PARK FLORIDA 33309

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PAGE 2 ANNIE'S KITCHEN, INC.

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

NEVILLE G. GRANT

4892 NW 95<sup>TH</sup> AVE

SUNRISE, FLORIDA 33351

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

SONIA R. GARDNER

3591 N. ANDREWS AVE #4D

OAKLAND PARK FLORIDA 33309

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\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above 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.*

  
NEVILLE G. GRANT / REGISTERED AGENT

1/23/08  
DATE

  
SONIA R. GARDNER / INCORPORATOR

1/23/08  
DATE