

PO 8000012759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

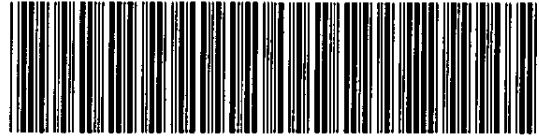
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100116532001

02/01/08--01016--001 **78.75

2008 FEB - 1 P 1: 29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

SUBJECT: ENSAVOR FOODS, 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: STEVEN HAMILTON
Name (Printed or typed)

8430 COMMONWEALTH AVE
Address

TAL. FL. 32220
City, State & Zip

800. 373. 7331
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2008 FEB -1 P 1:29

FILED

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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

ENSAVOR FOODS,

2000 FEB 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

8430 COMMONWEALTH AVE.
JAX, FL. 32220

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANUFACTURE AND DISTRIBUTE
ENSAVOR FOOD ITEMS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT ASPINWALL, PRESIDENT
8430 COMMONWEALTH AVE
JAX, FLA. 32220

40% OWNER

STEVE HAMILTON, VICE-PRESIDENT
10880 SW BLUE MESA
PORT ST. LUCIE, FL. 34987

40% OWNER

ALLISON MEDICAL, BENEFICIAL
8160 BLAKELAND DR.
UNIT C
LITTLETON, CO.

20% OWNER

ARTICLE VI REGISTERED AGENT

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

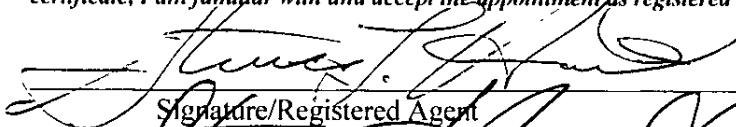
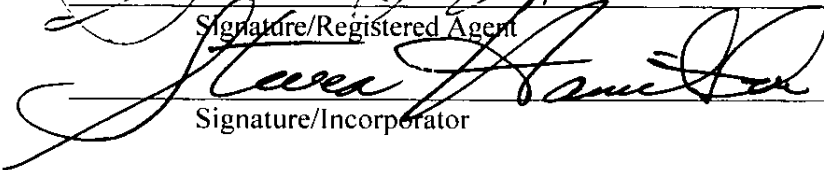
STEVE HAMILTON 8430 COMMONWEALTH AVE.
JAX. FL. 32220

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEVE HAMILTON
8430 COMMONWEALTH AVE
JAX. FLA. 32220

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

1/25/08
Date
1/25/08
Date

FILED
2008 FEB - 1 P 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA