P080000/4729

(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:





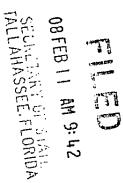
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OFFICE OF THE PROPERTY OF

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COVER LETTER

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

FROM:

SUBJECT: Mack's Family Kitchen, 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 □ \$78.75 **☑** \$87.50 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

Mack's Family Kitchen, Inc.
Name (Printed or typed)
3220 Whirl A Way Trail
Address
Tallahassee, FL 32309
City, State & Zip
850-509-8566
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:

Mack's Family Kitchen, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3220 Whirl A Way Trail, Tallahassee, FL 32309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: State New Business

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):

Mack Swain, 3220 Whirl A Way Trail, Tallahassee, FL 32309, President

Doris Swain, 3220 Whirl A Way Trail Tallahassee, FL 32309, Vice-President

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:	
Mack Swain, 3220 Whirl A Way Trail, Tallahassee, FL 32309	OB FEB 1	
ARTICLE VII INCORPORATOR	883	
The name and address of the Incorporator is:	E. F.	
Mack Swain, 3220 Whirl A Way Trail, Tallahassee, FL 32309	9: 42 STATE FLORIUM	
*************	********	
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		
Mark Swain	02-11-08	
Signature/Registered Agent	Date	
Mack Sww Signature/Incorporator	02-11-08 Date	
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