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# **COVER LETTER**

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

SUBJECT: Benjam	in & Wilson, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	.UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
FROM:	Name (	ine P. Wilson (Printed or typed) eewood Court	
	Address Orlando, Florida 32818 City, State & Zip		
	407-765-3282  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:

Benjamin & Wilson, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

6111 West Colonial Drive Orlando, Florida 32808



The purpose for which the corporation is organized is:

The purpose is to offer affordable "family style" meal service at affordable prices, by providing good food, good service, a good experience and competitive prices at a convenient location.

# ARTICLE IV

The number of shares of stock is:

# INITIAL OFFICERS AND/OR DIRECTORS

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

Catherine P. Wilson

- President

1876 Beewood Court

Orlando, Florida 32818

Carolyn P. Benjamin - U.ce President

1876 Beewood Court

REGISTERED AGENT

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

Catherine P. Wilson 1876 Beewood Court Orlando, Florida 32818

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Carolyn P. Benjamin 1876 Beewood Court Orlando, Florida 32818

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