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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FLORIDA LICENSES AND CORPORATIONS INC
Account Number : I20080000068
Phone : (305) 446-3442
Fax Number : (305) 446-3452

RECEIVED
DEPARTMENT OF STATE
09 MAR 23 PM 4:00

FLORIDA PROFIT/NON PROFIT CORPORATION

ALL STATE FOOD DISTRIBUTIONS INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

2009 MAR 23 P 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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March 23, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations
FLORIDA LICENSES AND CORPORATIONS INC

SUBJECT: ALL STATE FOOD DISTRIBUTIONS INC.
REF: W09000013604

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent and street address must be consistent wherever it appears in your document.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If you have any further questions concerning your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

FAX Aud. #: H09000065945
Letter Number: 109A00009759

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**ARTICLES OF INCORPORATION
OF
ALL STATE FOOD DISTRIBUTIONS INC.**

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of the corporation shall be:

**ALL STATE FOOD DISTRIBUTIONS INC.
ARTICLE II**

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- 1) Transact any and all lawful business
- 2) Said corporation shall further have powers
To have perpetual succession by it's corporate

Name: ALL STATE FOOD DISTRIBUTIONS INC.

ARTICLE IV

The aggregate number of shares, which the corporation shall have authority to issue, is the total sum of 1000 shares, having an individual par value of \$10.00

Unless otherwise stated in this article, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

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ARTICLE V

The street of the initial registered office and the name of the initial Registered Agent of this corporation shall be:

OSVEL CASTELLON
374 WEST 35 STREET
HIALEAH FLORIDA 33012

The principal office shall be:

374 WEST 35 STREET
HIALEAH FLORIDA 33012

ARTICLE VI

The initial Board of Directors shall consists of a total of TWO (2) person, and the name and address of the person who is to serve as an initial director is:

OSVEL CASTELLON
374 WEST 35 STREET
HIALEAH FLORIDA 33012

PRESIDENT

RAFAEL GARCIA
374 WEST 35 STREET
HIALEAH FLORIDA 33012

VICE PRESIDENT

The shares of each shareholders and registered agent to the Certificate of Incorporation are as follows:

OSVEL CASTELLON
374 WEST 35 STREET
HIALEAH FLORIDA 33012

50 %

RAFAEL GARCIA
374 WEST 35 STREET
HIALEAH FLORIDA 33012

50 %

The name and address of the incorporator executing these Articles of incorporation is:

OSVEL CASTELLON
374 WEST 35 STREET
HIALEAH FLORIDA 33012

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.- The name of the Corporation is:

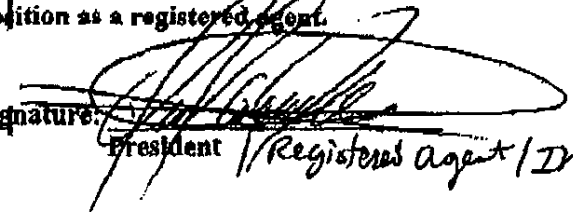
ALL STATE FOOD DISTRIBUTIONS INC.

2.- The name and address of the registered agent and office is:

Osvel Castellon
374 W. 35 Street
Hialeah, FL 33012

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as a registered agent.

Signature: 
President / Registered agent / Incorporator

Dated: March 19, 2009

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