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# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160

: (800)494-3124 Phone

Fax Number : (561) 455-9885

# FLORIDA PROFIT/NON PROFIT CORPORATION

## HARVEST VENDING, INC.

Certificate of Status	0
Certified Copy	0
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#### 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: HARVEST VENDING, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 7950 NIAGARA FALLS CT. ORLANDO, FL 32825

#### ARTICLE III PURPOSE

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

#### ARTICLE IV SHARES

The number of shares of stock is: 1,500 COMMON SHARES PAR VALUE \$0.01

#### ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

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

DIRECTOR, PRESIDENT: ANGEL F. RODRIGUEZ 7950 NIAGARA FALLS CT. ÖRLANDO, FL 32825

DIRECTOR, VICE-PRESIDENT: IVERILYN RODRIGUEZ 7950 NIAGARA FALLS CT. ORLANDO, FL 32825 2009 APR 15 AM II: 37
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### ARTICLE VI REGISTERED AGENT

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

**IVERILYN RODRIGUEZ** 7950 NIAGARA FALLS CT. ORLANDO, FL 32825

## ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

**IVERILYN RODRIGUEZ** 7950 NIAGARA FALLS CT. ORLANDO, FL 32825

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.

IVERILYN RODRIGUEZ / Registered Agent

IVERILYN KODRIGUEZ /Incurporator

Date

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