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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

60-4-8

## COVER LETTER

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

SUBJECT: RUDID BROTHERS, 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: LESLIE RUDID  
Name (Printed or typed)

6620 SW 50 TER  
Address

SOUTH MIAMI, FL 33155  
City, State & Zip

305 725 1247  
Daytime Telephone number

LESLIEDRUDID@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

**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**

RUDD BROTHERS, INC.

**ARTICLE II PRINCIPAL OFFICE**

6601 SW 49 TER  
SOUTH MIAMI, FL 33155

**ARTICLE III PURPOSE**

FOOD SERVICE

**ARTICLE IV SHARES**

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

DOUGLAS CLIVE RUDD, PRESIDENT, 6601 SW 49 TER  
SOUTH MIAMI, FL 33155  
LESLIE DOUGLAS RUDD, VICE PRESIDENT, 6620 SW 50 TER  
SOUTH MIAMI, FL 33155

**ARTICLE VI REGISTERED AGENT**


LESLIE RUDD  
6620 SW 50 TER  
SOUTH MIAMI, FL 33155

**ARTICLE VII INCORPORATOR**


LESLIE RUDD  
6620 SW 50 TER  
SOUTH MIAMI, FL 33155

\*\*\*\*\*

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

Date 7/29/2009

  
\_\_\_\_\_  
Signature/Incorporator

Date 7/29/2009

LESLIE RUDD