

PD 9000068173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

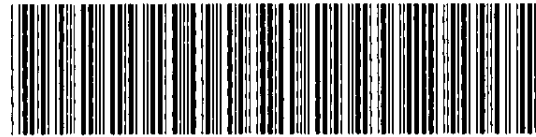
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

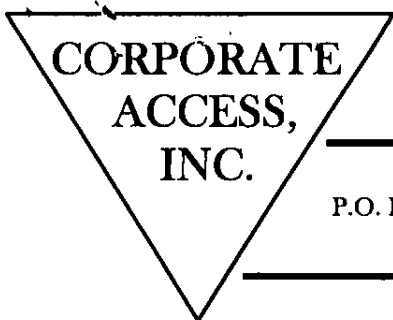


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08/12/09--01006--012 **78.75

AUG 13 2009
D.A. WHITE

RECEIVED
09 AUG 12 AM 10:48
FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
2009 AUG 12 A 9:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



When you need ACCESS to the world

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP:

8/12 Emily

☐ CERTIFIED COPY

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GS

Inc.

1. Mix-Frozen Yogurt, Inc.

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

Parasec

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:

MIX-Frozen Yogurt, Inc

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2009 AUG 12 A 9 43

ARTICLE II PRINCIPAL OFFICE

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

811 NO CATALINA AVE STE 1304
REDONDO BEACH CA 90277

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FROZEN YOGURT RETAIL ESTABLISHMENT

ARTICLE IV SHARES

The number of shares of stock is:

100,000 @ .01 & each.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEVEN LEE-CFO 811 NO. CATALINA AVE, STE 1304 REDONDO BEACH CA 90277
SABRINA PENN-CEO do do

ARTICLE VI REGISTERED AGENT

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

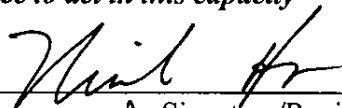
Paracorp Incorporated
236 East 6th Avenue
Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

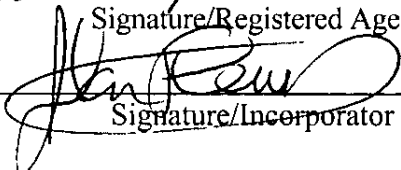
The name and address of the Incorporator is: Alan Fleurot

CAS Professional Group Inc
811 No Catalina Ave Ste 1304
Redondo Beach CA 90277.

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



Signature/Incorporator

8-11-2009

Date

08-10-09

Date