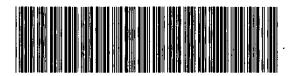
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Special Instructions to Filing Officer:				





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COVER LETTER

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

SUBJECT:	Citi-Gryl Family Vending, Inc.			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Joanne M. Brown Name (Printed or typed) 10218 Plant Drive			
	Palm Beac	Address h Gardens, FL 33410 y, State & Zip		
		-799-0090	· · · · · · · · · · · · · · · · · · ·	

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:

Citi-Gryl Family Vending, Inc.

ARTICLE II PRINCIPAL OFFICE

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

10218 Plant Drive Palm Beach Gardens, FL 33410

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joanne M. Brown: President

10218 Plant Drive

Palm Beach Gardens, FL 33410

ARTICLE VI REGISTERED AGENT

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

Corporation Service Company 1201 Hays Street Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

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

Joanne M. Brown 10218 Plant Drive

Palm Beach Gardens, FL 3341

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

Lamont W Jones Assistant VP

Signature/Registered Agent

Signature/Incorporator

10/2/10

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SECRETARY OF STATE

NUMBER OF STATE

OF STATE