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CAPITAL CONNECTION, INC.

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SUMMERS VENDIN	G COMPAN	Y, INC.		
	 			
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				A a office File
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art. of Amend. File
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			—	Dissolution / Withdrawal
				Annual Report / Reinstatement
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				Certificate of Good Standing
				Certificate of Status
			<u></u>	Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature		-		Fictitious Owner Search
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		1:30 Time	ł	UCC 11 Search
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10 JAN 21 AM !!: 25

ARTICLES OF INCORPORATION OF SUMMERS VENDING COMPANY, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

THE UNDERSIGNED SUBSCRIBER (s) TO THESE ARTICLES OF INCORPORATION,
NATURAL PERSON (s) COMPETENT TO CONTRACT, HEREBY FORM A CORPORATION UNDER
THE LAWS OF THE STATE OF FLORIDA.

ARTICLE 1 - CORPORATE NAME

THE NAME OF THE CORPORATE IS: <u>SUMMERS VENDING COMPANY, INC.</u>
THE PRINCIPLE MAILING ADDRESS OF CORPORATION IS: <u>6768 PORTOFINA COURT</u>
JACKSONVILLE,FL 32222

ARTICLE II - DURATION

THIS CORPORATION SHALL EXIST PERPETUALLY UNLESS DISSOLVED ACCORDING TO FLORIDA LAW.

ARTICLE III -PURPOSE

THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN ANY ACTIVITIES OR BUSINESS AS VENDING SERVICE PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE IV- CAPITAL STOCK

THE CORPORTATION IS AUTHORIZED TO ISSUE (five hundred) SHARES

(_500____) OF (one) DOLLAR (s) (\$_1.00____) PAR VALUE COMMON STOCK, WHICH SHALL

BE DESIGNATED "COMMON STOCK"

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

THE NAME AND ADDRESS OR THE INITIAL REGISTERED AGENT OF THIS CORPORATION IS: NAME: MIKE SUMMERS PRINCIPLE AND MAILING ADDRESS: 6768 PORTINA COURT CITY: <u>JACKSONVILLE</u>, FLORIDA ZIP; 32222 ARTICLE VI- INITIAL BOARD OF DIRECTORS THIS CORPORATION SHALL HAVE ONE DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED OR DIMINISHED FROM TIME TO TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS THAN ONE (1). THE NAMES AND ADDRESS OF THE INITIAL DIRECTOR(s) OF THE **CORPORATION ARE AS FOLLOWS:** NAME: MIKE SUMMERS NAME: PRINCIPLE AND MAILING ADDRESS: 6768 PORTOFINA CITY: JACKSONVILLE, FLORIDA ZIP 32222 NAM<u>E:</u> NAME; PRINCIPLE AND MAILING ADDRESS: CITY: **FLORIDA** ZIP ARTICLE VII - INCORPORATORS THE NAME AND ADDRESSES OF THE PERSON(s) SIGNING THESE ARTICLES OF **INCORPORATION ARE AS FOLLOWS:** NAME: MIKE SUMMERS PRINCIPLE AND MAILING ADDRESS: 6768 PORTOFINA COURT CITY: JACKSONVILLE FLORIDA ZIP 32222 NAME: NAME: PRINCIPLE AND MAILING ADDRESS:

FLORIDA

<u>ZIP</u>

CITY: JACKSONVILLE

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF: SUMMERS VENDING COMPANY, INC. (Name of corporation)

PURSUANT TO FLORIDA STATUE SECTIONS 48.091 AND 607.304, THE FOLLOWING SUBMITTED:

THE ABOVE CORPORTATION, DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS REGISTERED OFFICE AS INDICATED IN THE ARTICLES OF INCORPORATION

AT: 6768 POROFINA COURT JACKSONVILLE, FL. 32222

HAS NAMED:

LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

ACKNOWLEDGEMENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISIONS OF FLORIDA LAW IN KEEPING OPEN SAID OFFICE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS A REGISTERED AGENT.

TO JAN 21 AM II: 25
SECREIVAY OF STATE
TALLAHASSEE, FLORIDA

APT AND IS

Mudbu MMM

MIKE SUMMERS (Registered agent)

APPHOVED AND FILED

10 JAN 21 AM 11: 25

SECRETARY OF STATE TALLAHASSEE. FLORIDA

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER (s) HAVE EXECUTED THESE ARTICLES OF INCORPORATION THIS DAY OF January 11, 2010

x Mechael Sum	(SIGN)
	(SIGN)
	(SIGN)
	(SIGN)

STATE OF FLORIDA

SS

COUNTY OF DUVAL

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGEMENTS IN THE STATE AND COUNTY SET FORTH ABOVE PERSONALLY APPEARED

NAME: MIKE SUMMERS

KNOWN TO ME AND KNOWN TO BE THE PERSON (s) WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND WHO ACKNOWLEDGE BEFORE ME THAT (HE) OR (SHE) EXECUTED THESE ARTICLES OF INCORPORATION

IN WITNESS WHEREOF, I HAVE HEREUNTO AFFIXED MY HAND AND SEAL, IN THE STATE AND COUNTY AFORESAID THIS DAY OF JANUARY 11th 2010

(NOTARY SEAL) Lento Sulpon

(NOTARY PUBLIC, STATE OF FLORIDA AT LARGE)

LINDA L. WILSON
MY COMMISION # DD 846716
MY COMMISION EXPIRES: JANUARY 20, 2013

