PAGE 01/03 g/scripts/efilcovr.e Separtment of State Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION BARBARA'S PRODUCE INC.

Certificate of Status **Certified Copy** 1 Page Count 03 **Estimated Charge** \$78.75

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

BARBARA'S Produce INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

1402 NW 23 ST. Migmi FL 33142 10 JUL 14 AH II: 01

SECRETARY AF STATE
TALLAHASSLEE FLORIDA

<u>ARTICLE III – SHARES</u>

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Barbara Pedregal
1402 NW 23 ST.

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation i	s:	
Barbara PEdregal. 1402 NW 23 ST		
1402 NW 23 ST		
Miami FL 33142 The undersigned incorporator has executed these Articles of Incorporation in	هند	
The undersigned incorporator has executed these Articles of Incorporation the	is O	9 T. I.
day of20		entrevena. E i
	=	F. Services
Barbara Padregal		
Signature		المسالة
ARTICLE VI- DIRECTOR (S)	i =	

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Barbara PEdregal (P)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

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