

P10000083466

(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



500186374675

10/12/10--01063--007 **87.50

SECRETARY OF STATE
PALM BEACH, FLORIDA

10 OCT 12 PM 12:27

FILED

PS 10/13/10

COVER LETTER

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

SUBJECT: BLUE RIBBON GRILL, 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: CAROLYN CRUM

Name (Printed or typed)

1750 NW. 165TH STREET

Address

CITRA, FLORIDA, 32113

City, State & Zip

352-591-6088

Daytime Telephone number

RCCRUM520 @ AOL. 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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

BLUE RIBBON GRILL, INC.

10 OCT 12 PM 12:27

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1750 NW 165th Street, Citra, Florida, 32113

mailing address: P. O. box 520, Citra, Florida, 32113

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Prepare and sell food from mobile concession trailer

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Carolyn Crum,	Robert A. Crum
President	Director
P. O. Box 520	P. O. Box 520
Citra, Florida, 32113	Citra, Florida, 32113

ARTICLE VI REGISTERED AGENT

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

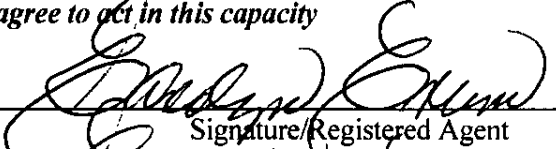
Carolyn Crum
1750 NW 165th Street
Citra, Florida, 32113

ARTICLE VII INCORPORATOR

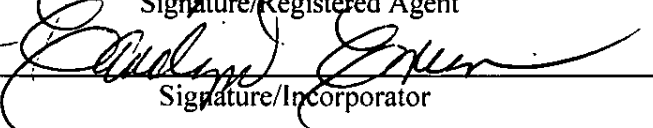
The name and address of the Incorporator is:

Carolyn Crum
1750 NW 165th Street
Citra, Florida, 32113

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

10/7/2010

Date

10/7/2010

Date