

P110000635289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

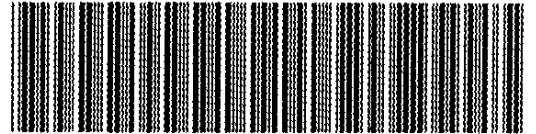
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/08/11--01013--020 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 APR -8 AM 1:30

COVER LETTER

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

SUBJECT: Sweets International, 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: Law Office of Alexander Socia, P.A.

Name (Printed or typed)

3650 N Federal Hwy, Ste 217

Address

Lighthouse Point, FL 33064

City, State & Zip

954-366-5256

Daytime Telephone number

alex@alexsocia.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)

ARTICLE I NAME

The name of the corporation shall be:

Sweets International, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

8820 Shoal Creek Lane
Boynton Beach, FL 33437

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in the food brokering business and in any and every lawful business whether herein mentioned or not.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Emanuel Fitch P, VP, T, S**

Address: **8820 Shoal Creek Lane
Boynton Beach, FL 33437**

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

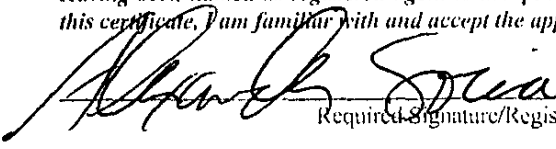
Name: **Alexander Socia, Esq.**
Address: **3650 N Federal Hwy, Ste 217
Lighthouse Point, FL 33064**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

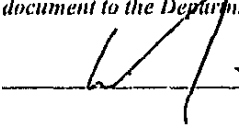
Name: **Eric Filkins, CPA**
Address: **440 S Federal Hwy, Ste 110
Deerfield Beach, FL 33441**

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


Required Signature/Registered Agent

4-3-11
Date

I submit this document and affirm that the facts stated herein are true, I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

4-5-11
Date

11 APR - 8 AM 7:38
SECRETARY OF STATE
TALLAHASSEE FL 32304

APR 11 2011
FILED