P/1000097221

| (Requestor's Name) | | | | |
|---|--------------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | ty/State/Zip/Phone | ⇒#) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE
AHASSEF FLORING

1/09/11

COVER LETTER

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

| SUBJECT: Obem Foods, Inc | | | | |
|--|---|--|--|--|
| (PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>) | | | | |
| Enclosed are an original and one (1) copy of the artic | cles of incorporation and a check for: | | | |
| \$70.00 Filing Fee & Certificate of Status | \$78.75 \$87.50 Filing Fee & Certified Copy & Certificate of Status | | | |
| | ADDITIONAL COPY REQUIRED | | | |
| FROM: Orlando Irsula Name (Printed or typed) | | | | |
| 2000 N. Bayshore Dr., #1010 | | | | |
| Address | | | | |
| Miami, FL 33137 City, State & Zip | | | | |
| 786-768-2156 Daytime To | elephone number | | | |
| oirsula@yahoo.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 INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ARTICLE I The name of the corporate | Obem Foods, Inc. | | |
|---|---|-----------------------------------|---------------------------|
| 20 | PRINCIPAL OFFICE Principal street address 00 N. Bayshore Dr. #1010 ami, FL 33137 | Mailing address, if different is: | |
| | URPOSE ch the corporation is organized is: rful business activities | | |
| | HARES of stock is: 200 Shares without per | value | |
| | NITIAL OFFICERS AND/OR DIRECTOR ::Orlando R. Irsula, Chairman 2000 N Bayshore Dr., #1010 Miami, FL 33137 | Name and Title: Address: | |
| Name and Title Address: | ::Belinda Irsula, President 2000 N.Bayshore Dr., #1010 Miami, FL 33137 | Address: | |
| Name and Title Address: | | Address: | |
| | EGISTERED AGENT | | se A |
| The <u>name and Florio</u> Name: Address: | la street address (P.O. Box NOT acceptable) of Orlando R. Irsula 2000 N Bayshore Dr., #1010 Miami, FL 33137 | _ | 11 NOV - |
| | NCORPORATOR See of the Incorporator is: Orlando R. Irsula 2000 N. Bayshore Dr., #1010 Miami, FL 33137 | | -8 PH 4: 4.1 SSEE, FLORID |
| | as registered agent to accept service of procedural familiar with and accept the appointment as reg | | |
| | lend 21 | | 11-04-2011 |
| | Required Signature/Registered Agent | | Date |
| | ent and affirm that the facts stated herein ar artment of State constitutes a third degree felor | | |
| | ty de | | 11-04-2011 |
| | Required Signature/Incorporator | | Date |