(Requestor's Name)				
(Address)				
(Address)				
(Ĉit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

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

SUBJECT: Berry Kingdom, Inc.		
	TE NAME - MUST INCLUDE SUFFI	•
Enclosed are an original and one (1) copy of the artic	res of incorporation and a check for	· ·
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy Certifie & Certifie Status	•
	ADDITIONAL COPY REQU	IRED
FROM: Christopher Groudas Name 26596 Ernest Lee Road	(Printed or typed)	
A	ddress	
Brooksville, Florida 3460	State & Zip	
727-460-2950 Daytime Te	elephone number	
cg22@tampabay.rr.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)

The name of the corp	Berry Kingdom, Inc.		
	PRINCIPAL OFFICE	• ,	
	Principal street address	Maili	ng address, if different is:
26	596 Ernest Lee Road	1716111	ing address, it different is.
	ooksville, Fl 34602		A Z.O
		- ' 	- S.C.
			DEC 1
ARTICLE III P			
	ch the corporation is organized is:		19 PHIZ: 45
Any and all lav	vful business.		7 Fact
			= 99
			? 33
			三 皇 (
			U To
ARTICLE IV S The number of shares	SHARES s of stock is: 10,000		
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECTO	DRS	
Name and Title	:Christopher Groudas - President	Name and Title:	
Address:	26596 Ernest Lee Road		
	Brooksville, Fl 34602		
	e:		·
Address:		Address:	·
			
Mana and Tid.		Niama and Mid.	
	: <u> </u>	Name and Title:	
Address:		Address:	
		_	
ARTICLE VI R	EGISTERED AGENT		
	la street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Christopher Groudas		
Address:	26596 Ernest Lee Road		
	Brooksville, Fl 34602		
			
ARTICLE VII I			
The name and addre	ess of the Incorporator is:		
Name:	Christopher Groudas		
Address:	26596 Ernest Lee Road		
	Brooksville, FI 34602		
this certificate, I am j	as registered agent to accept service of proce familiar with and accept the appointment as re		
(1) H.	ordar		12/15/2011
	Required Signature/Registered Agent		Date
	ent and affirm that the facts stated herein a artment of State constitutes a third degree felo		the false information submitted in a
191.	add		40/45/0044
			12/15/2011
	Required Signature/Incorporator		Date