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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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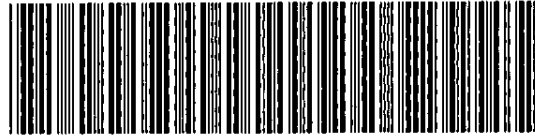
(Business Entity Name)

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FILED
2012 MAY 17 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 18 2012

COVER LETTER

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

SUBJECT: A & D FOOD TRANSFER AND CARGO SHIPPING, 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: A & D FOOD TRANSFER & CARGO SHIPPING, INC.
Name (Printed or typed)

7050 NE 2ND AVENUE STE B
Address

MIAMI FLORIDA, 33138
City, State & Zip

954-612-3387
Daytime Telephone number

CELIANEBRNLS@YAHOO.COM
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA

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: **A & D FOOD TRANSFER & CARGO SHIPPING, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
7050 NE 2ND AVENUE STE B
MIAMI FL, 33138

Mailing address, if different is:
7140 HOOD STREET
HOLLYWOOD FL, 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *Send Food*
**TO RENT A WARE HOUSE IN MIAMI AND THE CARIBEAN TO MAKE A FOOD DEPOT
TO RENT CONTAINER FROM HERE TO SHIP FOOD TO THE CARIBEAN FOR A FEE
TO CREATE MORE JOBS FOR HARD WORKING FAMILIES.**

ARTICLE IV SHARES

The number of shares of stock is: **50 SHARES.**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CELIANE BORNELUS PRES.	Name and Title: _____
Address: 7140 HOOD STREET	Address: _____
HOLLYWOOD FL, 33024	_____

Name and Title: ANTONIO JEAN CHARLES VP	Name and Title: _____
Address: 7140 HOOD STREET	Address: _____
HOLLYWOOD FL, 33024	_____

Name and Title: DWIGHT R ISMAEL TREAS	Name and Title: _____
Address: 7140 HOOD STREET	Address: _____
HOLLYWOOD FL, 33024	_____

ARTICLE VI REGISTERED AGENT

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

Name: **CELIANE BORNELUS**
Address: **7140 HOOD STREET**
HOLLYWOOD FL, 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **CELIANE BORNELUS**
Address: **7140 HOOD STREET**
HOLLYWOOD FL, 33024

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

05/08/2012
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

05/08/2012
Date

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