## P12000060298

(Req	uestor's Name)	<u> </u>		
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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Special Instructions to Filing Officer:				
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Office Use Only



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SECRETARY OF STATE

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## **COVER LETTER**

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

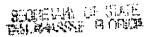
SUBJECT: Yannis Food distributor	r, INC			
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )			
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:			
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$87.50 Filing Fee & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED			
may Jaannia Kantimanaa				
FROM: <u>loannis Kentimenos</u> Name	(Printed or typed)			
7028 W.WATERS AVE				
TAMPA FL 33634				
City,	State & Zip			
813-579-4522				
Daytime T	elephone number			
vanniskentimenos@hotn	nail.com			
yanniskentimenos@hotmail.com  E-mail address: (to be used for future annual report notification)				

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 12 JUL -9 AM 10: 31



June 25, 2012

IOANNIS KENTIMENOS 7028 W. WATERS AVE TAMPA, FL 33634

SUBJECT: YANNIS FOOD DISTRIBUTOR, INC

Ref. Number: W12000034016

We have received your document for YANNIS FOOD DISTRIBUTOR, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The registered agent and the incorporator must sign using their complete name.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 112A00017355

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the co		utor, INC	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mai	ling address, if different is:
7	028 W.WATERS AVE		
	AMPA FL 33634		
<u>-</u>			
A DOVOL D IVI	nunnoce.		
ARTICLE III	<del></del>		\$ 5 T
	hich the corporation is organized is:		
Distributing			TELLER OF STATE
4 DOTAL D. W.	GII A DDG		704 0
ARTICLE IV	<del></del>		
The number of shar	res of stock is:1		<b>E</b>
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	CTORS	,
	ile: Ioannis Kentimenos		
Address:	7028 W.WATERS AVE	Address:	
	TAMPA FL 33634		
NI 4 Ti	41	Name and Title	
	tle:	Name and Title:	
Address:		Address:	
		<del></del>	
Name and Ti	tle:	Name and Title:	
Address:		Address:	And the second s
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ADTICLE III	DECIGREDED ACENT		
	<i>REGISTERED AGENT</i> rida street address (P.O. Box NOT acceptal	ale) of the registered agent is	
Name:	Ioannis Kentimenos		•
Address:	7028 W WATERS AVE		
radicss.	TAMPA FL 33634	··· <del>·</del>	
	JAMEA II. MAKA		
ARTICLE VII	INCORPORATOR		
The name and add	<u>ress</u> of the Incorporator is:		
Name:	Ioannis Kentimenos	<del></del>	
Address:	7028 W WATERS AVE TAMPA FL 33634		
	ed as registered agent to accept service of p on familiar with and accept the accept and a		
lochnis K	out menos		07-01-12
1-411	ey time nos  Required Signano i i i i i i i i i i i i i i i i i i i		Date
	ment and affirm that the juces sumen herei		
	partment of State constitues a third degree		
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logunis	Kentineno Required Signature Incorporator		<u>07~01~12</u> Date
	Required Signature Incorporator		Date