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(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:	
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COVER LETTER

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

SUBJECT:	C. HAUS BERRY FINE F (PROPOSED CORPORA	ood SINC.	
	(PROPOSED CORPORA	TE NAME - MUST INC	LUDE SUFFIX)
Enclosed are an or	riginal and one (1) copy of the art	icles of incorporation ar	nd a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
	_	ADDITIONAL C	OPY REQUIRED
FROM:	Junthia L	e (Printed or typed) Nthia Hans DERRY	/
	4657 ROMONOKE	Blud	
	7.0	Address	
	JACKSONVIlle, FL City,	32208	
	City,	State & Zip	
	904-764-6630		
(Daytime T YN Hina Han =	elephone number Sherry * Va	. hoo. Com
 -	E-mail address: (to be use	d for future annual report	notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2012

CYNTHIA HANSBERRY 4657 ROAONOKE BLVD JACKSONVILLE, FL 32208

SUBJECT: C. HANSBERRY FINE FOODS INC.

Ref. Number: W12000057152

We have received your document for C. HANSBERRY FINE FOODS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) I thur VII.

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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 312A00027373

Division of Comparations DO DOV 6297 Tallahassas Florida 2991

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/	for Chapter 621, F.S. (Profit)
The name of the corporation shall be:	Hansberry Fine foods, For
ARTICLE II PRINCIPAL OFFICE	
Principal street address 1657 Keanoke Aud AKEONVIIIE FIR 32908	Mailing address, if different is:
ARTICLE III PURPOSE	a pui in Proken
The purpose for which the corporation is organized is.	Gods to the Public in Cooked, state, County or City Health
of April 11 m. VIA 1/5/ FDA	State Mounty or City Health
depart nent approves	
ARTICLE IV SHARES The number of shares of stock is: 100 P 100. 00	n V ta sé
ARTICLE V INVIAL OFFICERS/AND/OR DIRECTOR	Sto/presdent ; + 1/4. Bod/Col
	Name and Title: Korder Till Dide
2 1 + 1 1 1 2 1 2 1	resident Phylic Wike Secretary
Name and Title #1990 JOHNSON, YICE 1" Address: 3138 1/1/02 57	Name and Title: Wilson Address:
JAX 1 12 p 32208	Jackson VIII, PA
Name and Title:	Name and Title:
Address:	Address:
	<u>≻</u>
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of Name:	the registered agent is:
Address: The ML KINDAUE	
	32084 B B
ARTICLE VII INCORPORATOR The name and address of the Incorporator is,	
Name: (4.1 this HASSDERRY Address: 4657 Panake Alles	· · · · · · · · · · · · · · · · · · ·
Ackson ville Floride 3	12508
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 regi	istered agent and agree to act in this capacity
Gow Duglow	1 1/27/12
Required Signature/Registered Agent	Bate
I submit this document and affirm that the facts stated herein are to	true. I am aware that the false information submitted in a
document to the Department of State constitutes a third degree felony	v us provinca jor in 8.81 /.155, r.s.
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