P130009282

₩		
(Red	questor's Name)	
		· · · · · · · · · · · · · · · · · · ·
(Add	dress)	
(Add	dress)	
,	,	
(City	//State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
·	,	·
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



100243656281

01/25/13--01032--010 **78.75

13 JAN 29 AM 11: 20

January 29, 2013

Florida Department of State Division of Corporations

Re: Document Number - W13000005428

Attention: Jessica Fax: (850) 245-6804

Dear Jessica,

Per our conversation yesterday afternoon, please accept this as authorization to use the Trademark, T10000001097, which I own. It was originally associated with my company A Sweet Bite, LLC (936 Allamanda Drive, Delray Beach, FL 33483).

I am now requesting it be used and associated with my new company, A Sweet Bite, Inc. (11404 New Village Place, Boca Raton, FL 33428).

Thank you for your immediate attention in this matter.

Sincerely,

Cherry P Stanimirovic

(561) 452-4545

State of Florida, Courty of talm Beach Salaw Basel

SABINA BOYDEH Notary Public. State of Florida Commission# EE 102151 My comm. expires June 12, 2015



January 28, 2013

CHERRY STANIMIROVIC 11404 NEW VILLAGE PLACE BOCA RATON, FL 33428

SUBJECT: A SWEET BITE, INC. Ref. Number: W13000005428

We have received your document for A SWEET BITE, 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 name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return 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.

Pamela Smith
Regulatory Specialist II

Letter Number: 913A00002080

COVER LETTER

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

Tarranassec, T L 525	717		
SUBJECT: A S	weet Bite, Inc. (PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
	·		16 X 1
FROM: C	herry Stanimirov	<i>r</i> ic	
		e (Printed or typed)	
11	404 New Village	e Place	
		Address	
Во	oca Raton, FL 33	3428	
		, State & Zip	
56	61-452-4545		

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

Daytime Telephone number

cherry@asweetbite.com
E-mail address: (to be used for future annual report notification)

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

ARTICLE I 'NAM	In compliance with Chapter 607 and/o	or Chapter	621, F.	S. (Profit) *	SECRETAR	LED Y OF STATE BORPORATIONS
ARTICLE II PRIN	E On shall be: A Sweet Bite, Inc. ICIPAL OFFICE Principal street address lage Place		N	1ailing addre	13 JAN 29 ss, if different is	
Boca Raton, F	L 33428					
ARTICLE III PURI The purpose for which th	Profession is organized is:	ional C	Corp	oration		
ARTICLE IV SHA The number of shares of s	stock is:					
	TAL OFFICERS AND/OR DIRECTORS Cherry Stanimirovic - President		1.777.1	Drago Stan	imirovic - Vice	President
Name and Title	11404 New Village Place Boca Raton, FL 33428		1 Itte:_ -	11404 N	lew Village aton, FL	Place
	BOCA NAION, 1 L 33420		-	DOCA IN	atori, i L	
Name and Title:			l Title:			
Name and Title:		Name and	Title:			
Address			_			
			•			

(conti.)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

, Name an	d Title:	Name and Title:	13 JAN 29 AM II: 20
Address		_ Address:	
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) or	f the registered agent is:	
Name:	Cherry Stanimirovic		
Address:	11404 New Village Place	-	
	Boca Raton, FL 33428		
ARTICLE VII The name and ad	INCORPORATOR dress of the Incorporator is:		
Name:	Cherry Stanimirovic		
Address:	11404 New Village Place	•	
	Boca Raton, FL 33428		
Having been nam this certificate, I g	ned as registered agent to accept service of process om familiar with and accept the appointment as reg	for the above stated co	orporation at the place designated in to act in this capacity Jan. 21, 2013
,	Required Signature/Registered Agent	ļ	Date
I submit this docu document to the J	iment and affirm that the facts stated herein are i Department of State constitutes a third degree felong	true. I am aware that i y as provided for in s.8	the false information submitted in a 17.155, F.S.
	Required Signature/Incorporator		Jan. 21, 2013