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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To: Division of Corporations Fax Number : (850)617-6381 From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : 120000000019 Phone : (305)552-5973 : (305)675-5944 Fax Number **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION TOTAL FRESH DIRECT INC.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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

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NAME: The name of the corporation is: INC. ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: SHARES: The number of shares of stock is: INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is INCORPORATOR: The name and address of the Incorporator is:

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Required Signatures:

Having been named as registered agent to accept servi—of process for the above stated corporation at the place designated in this certificate, am familiar with and accept the appointment as registered agent and agree to act in this capacity

ZO16
Regimered Agent 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.

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