

Division of Corporations

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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 : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800) 221-2972  
Fax Number : (888) 692-9256

**\*\*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  
TRI-PANN DISTRIBUTORS INC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

AUG 31 2016

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

**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: TRI-PANN DISTRIBUTORS INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

5445 NW 122 DR.

CORAL SPRINGS, FL 33076

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: general

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: DIANA RUSSO - DIR & PRES

Name and Title: \_\_\_\_\_

Address 5445 NW 122 DR.

Address: \_\_\_\_\_

CORAL SPRINGS, FL 33076

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

16 AUG 30 AM 10:38  
NOTARY PUBLIC  
STATE OF FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: DIANA RUSSO  
Address: 5445 NW 122 DR.  
CORAL SPRINGS, FL 33076

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: DIANA RUSSO  
Address: 5445 NW 122 DR.  
CORAL SPRINGS, FL 33076

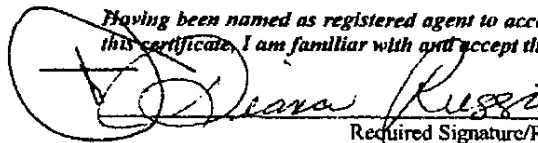
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

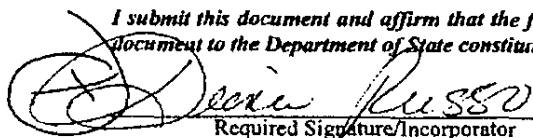
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

8/28/16  
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

8/28/16  
Date