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COVER LETTER

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

SUBJECT: C&C B	AR-B-Q INC		
SOMECT.	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation an	d a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONAL CO	Status DPY REQUIRED
Ϋ́	VETTE WILIAMS		
FROM:		e (Printed or typed)	
64:	2 W BREVARD ST		
_	-, ··· ==	Address	
TA	LLAHASSEE, FL 32304		
_	City	, State & Zip	
850	0-222-0913		
	Daytime	Felephone number	
Dy	tec@aol.com		
	E-mail address; (to be use	ed for future annual report	notitication)

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

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

ARTICLE II PRINC				
831 OLD BAINBRIDG	Principal <u>street</u> address JE ROAD		Mailing ac 642 W BREVARD	ddress, if different is: OST
TALLLAHASSEE, FL			TALLAHASSEE,	
ARTICLE III PURPO The purpose for which t	OSE he corporation is organized is:	ANY AND AL	L LAWFUL BUSINESS	S
ARTICLE IV SHAR	F\$			
The number of shares of	10,000 stock is:			
ARTICLE V INITIA	AL OFFICERS AND/OR DIRE	CTORS		
	M. YVETTE WILLIAMS, P		Name and Title:	
Address	831 OLD BAINBRIDGE RO	AD.	Address:	
, 1000	TALLAHASSEE, FL 32304			
				1:0, 22
Name and Title	KENDAL WILLIAMS, V. PE	RESIDENT	Name and Title:	AHA VÆEL VAHA
Address	831 OLD BAINBRIDGE RO			ASS AND A P
	TALLAHASSEE, FL 32304			AN TO
				1.0.2 2.0.3
Name and Title	:	;	Name and Title:	
Address				

Name an	d Title:	_ Name and Title:	
Address		Address:	
	 		
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) (of the registered agent is:	
Name:	JP GOLDSMITH FINANCIAL SERVICES		
Address:	644 W BREVARD ST	_	
	TALLAHASSEE, FL 32304	_	
ARTICLE VII	<u>INCORPORATOR</u>		
The name and ad	ddress of the Incorporator is:		
Name:	M. YVETTE WILLIAMS	_	
Address:	831 OLD BAINBRIDGE ROAD	_	
	TALLAHASSEE, FL 32304		
Effective date, if (If an effective d filing.) Note: If the date	other than the date of filing: ate is listed, the date must be specific and cann inserted in this block does not meet the applicable ffective date on the Department of State's records	ot be more than five days p e statutory filing requirement	orior or 90 days after the
	ned as registered agent to accept service of proces am familiar with and accept the appointment as re		
Alle	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felo		
Requi	red Signature/Incorporator		Date
	j		

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