Electronic Articles of Incorporation For

P19000025184 FILED March 06, 2019 Sec. Of State kepage

COUNTRY KITCHEN TASTE INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

COUNTRY KITCHEN TASTE INC

Article II

The principal place of business address:

665 SW 27TH AVE 11 FORT LAUDERDALE, FL. 33312

The mailing address of the corporation is:

5411 NW 22ND CRT LAUDERHILL, FL. 33313

Article III

The purpose for which this corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is: 100

Article V

The name and Florida street address of the registered agent is:

ROSEMARIE MASON 5411 NW 22ND CRT LAUDERHILL, FL. 33313

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: ROSEMARIE MASON

Article VI

The name and address of the incorporator is:

ROSEMARIE MASON 5411 NW 22ND CRT

LAUDERHILL FL 33313

March 06, 2019 Sec. Of State kepage

P19000025184

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Electronic Signature of Incorporator: ROSEMARIE MASON

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: CEO ROSEMARIE MASON 5411 NW 22ND CRT LAUDERHILL, FL. 33313

Article VIII

The effective date for this corporation shall be:

03/01/2019

OUNT KIT EN TA TE E STÂUN NT

I hereby give permission to [ROSEMARIE MASON] to use.

mother: COUNTRY KITCHEN TASTE RESTAURANT NC.

Description: JAMAICAN CUISINE RESTAURANT

I hereby authorize the ROSEMARIE MASON to edit, alter, copy, exhibit, distribute and publish in print, video, audio recorded productions, and on the World Wide Web this material for purposes of publicizing COUNTRY KITCHEN TASTE RESTAURANT INC. programs or other lawful purpose without payment or any other consideration.

By signing this document, I understand that:

The NAME will become the procenty of ROSEMARIE MASON and will not be returned to me.

In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. I waive any right to regalties or other compensation arising or related to the use of the materials. I hereby hold harmless and release and forever discharge the COUNTRY KITCHEN TASTE RESTAURANT INC. from all claims, demands, liability and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

3/16/19 Date

[optional clause]
In addition, I would like to specify the following conditions for use of the materials:

This authorization is continuous and WILL NOT BE WITHDRAWN BY ME. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

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Signature of Conector

On behalf of the above named organization

Mar 25 19, 09.12a

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Notary Form

State on Howde

Hounty of Broward

on 3/16/19 before me, Phyllis Great

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Landward to the on the basis of satisfactory evidence to be the persontal whose game(a). Ware substriped to the within instrument and has hereby asknowledged to me that he/ane/they have executed the same in ois/hei/thek authorized impactivities), and that by his/her/their signature(s) on the instrument the person(s) or the entay upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal

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