

Division of Corporations

**P2200021313**  
Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
AMS FOODS INC**

Certificate of Status	1
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**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: AMS FOODS INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

2795 34TH ST SSAINT PETERSBURG, FL 33711**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE**ARTICLE IV SHARES**The number of shares of stock is: 1,500 AT NO PAR VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ANTHONY SAURO - PRESIDENT

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

Address 330 3RD ST S

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

SAINT PETERSBURG, FL 33701

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

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

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

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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: ANTHONY SAURO  
 Address: 2795 34TH ST S  
 SAINT PETERSBURG, FL 33711

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:


Name: ANTHONY SAURO  
 Address: 330 3RD ST S  
 SAINT PETERSBURG, FL 33701

**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 days prior or 90 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

MARCH 18, 2022

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

MARCH 18, 2022

Date

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