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Florida Department of State  
Division of Corporations  
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2<sup>nd</sup> Attempt

From: Account Name : AT PLUS CORP  
Account Number : I20140000060  
Phone : (305)406-3800  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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FLORIDA PROFIT/NON PROFIT CORPORATION  
NH FOOD AND SERVICES CORP

|                       |         |
|-----------------------|---------|
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## AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared **NELSON E HERNANDEZ**, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **NH FOOD AND SERVICES CORP**, a Florida corporation to be filed with the Florida Department of State on or about **Septiembre 27, 2023**.
2. The undersigned hereby consents to and authorizes the use by **NH FOOD AND SERVICES CORP**, of the name **NH FOOD AND SERVICES CORP**.
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

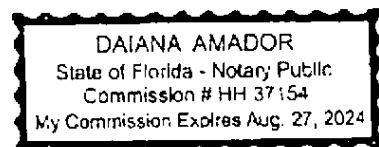
NELSON E HERNANDEZ  
NELSON E HERNANDEZ

STATE OF FLORIDA           )  
  ) SS:  
COUNTY OF MIAMI-DADE )

PERSONALLY appeared before me, **NELSON E HERNANDEZ**, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this **27** day of September **2023**.

  
Notary Public Signature



**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: NH FOOD AND SERVICES CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

10128 NW 41 ST ST

DORAL FL 33178

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any And All Lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: NELSON E HERNANDEZ (P) Name and Title: \_\_\_\_\_

Address 10128 NW 41 ST ST Address: \_\_\_\_\_

DORAL FL

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

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

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

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

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TALLAHASSEE, FL 32310

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

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

Name: NEILSON E HERNANDEZ  
 Address: 10128 NW 41 ST ST  
Doral FL 33178

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

Name: NEILSON E HERNANDEZ  
 Address: 10128 NW 41 ST ST  
Doral FL 33178

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 TALLAHASSEE, FL  
 (1)

**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:*

NEILSON E HERNANDEZ  
 Required Signature/Registered Agent

09/27/2023  
 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.*

NEILSON E HERNANDEZ  
 Required Signature/Incorporator

09/27/2023  
 Date