

TRANSMITTAL LETTER

P 95000035249

Department of State  
Division of Corporations  
P. O. 6327  
Tallahassee, FL 32314

ATTENTION: BOBBI

FILED  
95 MAY -5 AM 10:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: GOURMONDE, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

100001478031  
-05/08/95--01008--016  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Please return the photocopy to me with the filing date stamped on it, and all other documents by express mail with the enclosed prepaid voucher. Thank you in advance.

FROM:

JOHN SPRINGSTEAD

Name (printed or typed)

1306 VIRGINIA STREET

Address

KEY WEST, FL 33040

City, State & Zip

(305) 293-8837

Daytime Telephone Number

BR 5/5

## Articles of Incorporation

1. The name of the corporation shall be: GOURMONDE, INC.
2. The principal place of business and mailing address of the corporation is:  
1306 VIRGINIA STREET, KEY WEST, FL 33040
3. The corporation shall have the authority to issue 1,000 shares of stock.
4. The registered agent of the corporation is JOHN SPRINGSTEAD and the registered street address is 1306 VIRGINIA STREET, KEY WEST, FL 33040.
5. The initial Board of Directors shall have     member(s) whose name(s) and address(es) is/are as follows: NONE AT THIS TIME

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is JOHN SPRINGSTEAD whose street address is 1306 VIRGINIA STREET, KEY WEST, FL 33040

Dated MAY 1, 1995

John Springstead  
Incorporator

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated MAY 1, 1995

John Springstead  
Registered Agent

FILED  
95 MAY -5 AM 10:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORIGINAL