

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-223-0175
2-0300 FAX

800-342-8086



Handwritten signature: P. Brown
Handwritten date: 8/3/95

ACCOUNT NO. : 072100000032

REFERENCE : 649402 *Patricia Rogers*

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : July 27, 1995

ORDER TIME : 2:38 PM

ORDER NO. : 649402

CUSTOMER NO: 159087A

CUSTOMER: David Liberman, Cpa
DAVID LIEBERMAN, CPA

1629 Central Street

Stoughton, MA 02072

DOMESTIC FILING

NAME: WINFIELD TRADING CO., INC.

XXX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XXX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Danny G. Smith

EXAMINER'S INITIALS:

T. BROWN

AUG - 1 1995

FILED
95 AUG - 1 PM 2:20
SEC. OF STATE
TALLAHASSEE, FL 32304

ARTICLES OF INCORPORATION
OF
WINFIELD TRADING CO., INC.

FILED
85-105-1-112-20
JAN 2 20
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

WINFIELD TRADING CO., INC.

The address of the principal office of this corporation shall be Post Office Box 398033, Miami Beach, Florida 33139, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having no par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Service Company, has hereunto set their hand and seal of Corporation Service Company on July 31, 1995.

CORPORATION SERVICE COMPANY

By:

Karen B. Rojar
Its Agent, Karen B. Rojar

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.05, Florida Statutes.

CORPORATION SERVICE COMPANY

By:

Karen B. Rozar
Its Agent, Karen B. Rozar

GMC/dgs

FILED
95 AUG -1 PM 2:20
TALLAHASSEE
FLA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

PA5000059317

WINFIELD TRADING CO., INC.

FILED
96 SEP -9 PH 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

P.O. Box 398033
MIAMI BEACH FL.
33139

Mailing Address

P.O. Box 398033
MIAMI BEACH FL.
33139

If above addresses are incorrect in any way, file through an officer, director, and/or corporation below

New Principal Office Address, if Applicable

New Mailing Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4 Date Incorporated or Qualified
To Do Business in Florida

08/01/95

5 F.E. Number

65-0596028

Applied For

Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Street Address of Each Officer and/or Director of Florida nonprofit corporations must list at least 3 directors

1. Name of Officer and/or Director	2. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	3. City / State / Zip
PRES. JIYIA MATTHAYAMPHAN	2624 NW 21 TERR.	MIAMI FL. 33142
		400001944804
		-09/11/96--01066--004
		****345.00 ****345.00

REINSTATEMENT 96

8/22/96 01078/05
\$35.00 dep.

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL. 32301-2525

9. Name and Address of New Registered Agent

Name J. MATTHAYAMPHAN
Street Address (P.O. Box Number is Not Acceptable)
2624 NW 21 TERR.
Suite, Apt. #, Etc.
N
City MIAMI
State FL Zip Code 33142

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

J. Matthayamphan
REGISTERED AGENT MUST SIGN

Date 9/3/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. Matthayamphan

9/3/96 305-634-6600
Date Daytime Phone

CR-6045 (12/95)