

P95000060192

TRANSMITTAL LETTER

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

SUBJECT: FLORIDA TASTEFEST, 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

Additional Copy Required

FROM: KAREN ARMEL
Name (printed or typed)

202 WHARFSIDE WAY
Address

JACKSONVILLE, FL 32207
City, State & Zip

904-396-1935
Daytime Telephone number

100001552501
08/03/95--01021--017
***131.25 ***131.25

AUG 4 1995 BSE

95 AUG - 3 11:08:35
FILED

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be FLORIDA TASTEFEST, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be

202 WHARFSIDE WAY
JACKSONVILLE, FL 32207

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: The corporation shall have the authority to issue 7500 shares of common stock, each of which shall have a par value of \$1.00 and shall have voting rights. Each shareholder shall have preemptive rights.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KAREN ARMEL
202 WHARFSIDE WAY
JACKSONVILLE, FL 32207

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are).

KAREN ARMEL
202 WHARFSIDE WAY
JACKSONVILLE, FL 32207

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of AUGUST, 19 95.

Karen Armel

Signature

NA

Signature

NA

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FLORIDA TASTEFEST, INC.

2. The name and address of the registered agent and office is:

KAREN ARMEL

(NAME)

202 WHARFSIDE WAY

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

JACKSONVILLE, FL 32207

(CITY/STATE/ZIP)

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 I am familiar with and accept the obligations of my position as registered agent.

Karen Armel

(SIGNATURE)

8-1-95

(DATE)