P95000062020

FROM:			
Name of corporation: SUNRI	SE DONUTS, INC.	· · <u>-</u>	
Street address of the corporation119_Rones	wood Lane		
City Greenacres	StateFL	ZIP	33463
DEAR CORPORATIONS DIVISION:			
Please find enclosed:			
1. An original Articles of Incorporation	and one copy for t	he above n	amed corporation.
2. A certified check or money order in	the amount of \$	70.00	for filing fees.
A CERTIFIED COPY is 🖎 is not 🗆	requested.		
If a certified copy is requested, the add enclosed.	itional fee in the ar	mount of \$_	52.50 is
Please send responses or receipts cond	cerning this filing t		
Thank you very much.		1	800001557776 -08/10/9501077005 ****122.50
Jose DeCastro			95 AU T
407-369-3614 Telephone Number	5		

ARTICLES OF INCORPORATION of

SUNRISE DONUTS, INC.			
Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator articles of incorporation for the purpose of forming a for-profit corporation.	submit		
Article 1. The name of the Corporation is:		5 (10)	8 8
Sunrise Donuts, Inc.	,	<u> </u>	
Article 2. The principal place of business and mailing address of this corporation	n is:	## ##	and the second
119 Rosewood Lane, Greenacres, FL 33463		• ••	•
Article 3. The corporation is authorized to issue one class of stock, that 100 shares of no par value, common stock, with identical privileges, the transfer of which is restricted according to the bylaws of the corp	al righ	ts and	
Article 4. The name and address of the corporation's initial registered agent is:			
Jose DeCostro, 119 Rosewood Lane, Greenacres, FL 33463			
Article 5. The name and street address of the incorporator of this corporation is	:		
Article 6. No Director shall be held liable to the corporation or its shareholders damages due to a breach of fiduciary duty, unless the breach is a result o intentional misconduct, or illegal actions.	for m	onetar Iealing	y I.
In witness whereof, the undersigned incorporator has executed these Articles of Incorporation below. The undersigned incorporator hereby declares, under penalty of perjury, that the statemetergoing Articles of Incorporation are true, and that the incorporator is at least eighteen years of	ents mad	the dat de in the	e e
8-8-95 Signature of Incorporator Name of Incorpora	PÃO 4	€ 0-	457RD

CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to section 607.0501 of The Florida Business Corporation Act, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office and registered agent, in the State of Florida.

1. The name and address of the corporation's registered age	ent and registered office is:	
Jose DeCastro		
Name		
119 Rosewood Lane		
Street address		
Greenacres, FL 33463		
City/State/ZIP		
Having been named as the registered agent and to accept stated corporation at the place designated in this certificate as registered agent and agree to act in this capacity. It is provisions of all statutes relating to the proper and complete am familiar with and accept the obligations of my position at the control of the proper and complete am familiar with and accept the obligations of my position at the control of the proper and complete am familiar with and accept the obligations of my position at the control of the proper and complete am familiar with and accept the obligations of my position at the proper and complete am familiar with and accept the obligations of my position at the proper and complete am familiar with an accept the obligations of my position at the proper and complete am familiar with an accept the obligations of my position at the proper and complete am familiar with an accept the obligations of my position at the proper and complete am familiar with an accept the obligations of my position at the proper and complete am familiar with an accept the obligations of my position at the proper and complete am familiar with an accept the obligations of my position at the proper and complete am familiar with a complete and the proper and complete am familiar with a complete and the proper and complete and th	, I hereby accept the appointment further agree to comply with the e performance of my duties, and i	
Signature of redistered agent.	95	
Date of signature	- AUG	
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