

**P95000063941**

**TRANSMITTAL LETTER**

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

100001557731  
-08/10/95--01072--015  
\*\*\*\*131.25 \*\*\*\*131.25

SUBJECT: G. P. ENTERPRISES, 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: GREGORY PERLMAN  
Name (printed or typed)  
3300 N.E. 191 Street, Suite 516  
Address  
Aventura, FL 33180  
City, State & Zip  
305- 935-0499  
Daytime Telephone number

789,503,671  
7/95-16246

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

BROWN AUG 18 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

August 11, 1995

GREGORY PERLMAN  
3300 N.E. 191ST STREET  
SUITE 516  
AVENTURA, FL 33180

SUBJECT: G. P. ENTERPRISES, INC.  
Ref. Number: W95000016246

We have received your document for G. P. ENTERPRISES, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6972.

Doris Brown  
Document Specialist

Letter Number: 895A00037822

## ARTICLES OF INCORPORATION

*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:

WHOLLY GUACAMOLE ENTERPRISES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

3300 N.E. 191 St.  
Suite 516  
Aventura, FL 33180

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GREGORY PERLMAN  
3300 N.E. 191 St.  
Suite 516  
Aventura, FL 33180

**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):**

GREGORY PERLMAN  
3300 N.E. 191 St.  
Suite 516  
Aventura, FL 33180

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

7 th day of August, 19 95.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
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: WHOLLY GUACAMOLE ENTERPRISES, INC.

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

GREGORY PERLMAN

(NAME)

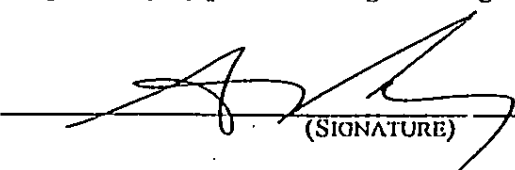
3300 N. E. 191 St., Suite 516

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

Aventura, FL 33180

(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above state 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.*

  
(SIGNATURE)

August 7, 1995

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314