

P96000039380

TRANSMITTAL LETTER

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

SUBJECT: Countrywide Snacks, 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: Rubin Osherovitz  
Name (printed or typed)  
4585 N. Michigan Avenue  
Address  
Miami Beach, FL 33140  
City, State & Zip  
305-534-3909  
Daytime Telephone number

FILED  
95 APR 26 PM 8:55  
TALLAHASSEE, FLORIDA  
STATE

APR 30 1996 BSB

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

## ARTICLES OF INCORPORATION

96 APR 26 AM 8:55

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:

Countrywide Snacks, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

4585 N. Michigan Ave  
Miami Beach, FL 33140

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Rubin Osherovitz  
4585 N. Michigan Ave  
Miami Beach, FL 33140

**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):

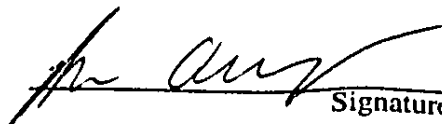
Rubin Osherovitz (President)  
4585 N. Michigan Ave  
Miami Beach, FL 33140

Sharon Osherovitz (secretary)  
4585 N Michigan Ave  
Miami Beach, FL 33140

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

23<sup>rd</sup> day of April, 19 96.

(An additional article must be added if an effective date is requested.)

  
Signature

  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**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: Countrywide Snacks, Inc.

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

Rubin Dsherdvitz  
(NAME)

4585 N. Michigan Ave  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami Beach, FL 33140  
(CITY/STATE/ZIP)

FILED  
85 APR 26 AM 8:55  
TALLAHASSEE, FLORIDA

*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.*

  
(SIGNATURE)

4-23-96  
(DATE)

P96000037380

Rubin Oshervitz  
Requestor's Name

4585 N. Michigan Ave.  
Address

miami beach, Fla. 33140  
City/State/Zip Phone #

000002166140--0  
-05/05/97--01109--012  
\*\*\*\*\*35.00 \*\*\*\*\*35.00  
Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
97 MAY -5 AM 11:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Diss* 5-13-97

ARTICLES OF DISSOLUTION

FILED

97 MAY -5 AM 11:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: COUNTRY WIDE SNACKS, INC.

SECOND: The articles of incorporation were filed on: 4/26/96

THIRD: (CHECK ONE)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

Signed this 1 day of MAY, 19 97

Signature [Signature]  
(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

RUBIN OSHEROVITZ  
(Typed or printed name)

Pres.  
(Title)