

P96000047485

TRANSMITTAL LETTER

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

05/31/96 01013-010
*****78.75 *****78.75

SUBJECT: K.B. TRUFFLES food SERVICE of So. Florida, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and 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

65 MAY 30 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FROM:

KAREN BURKARD
Name (printed or typed)

3754 NW 107th Way
Address

SUNRISE, FLORIDA 33351
City, State & Zip

954-791-9124
Daytime Telephone number

PH 6/5/96

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

ARTICLES OF INCORPORATION

FILED

96 MAY 30 AM 9:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

KB TRUFFLES FOODSERVICE OF SO. FLORIDA INC.

ARTICLE II PRINCIPAL OFFICE

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

4701 S.W. 45th STREET
FT LAUDERDALE, FLORIDA 33314

ARTICLE III SHARES

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

10

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KAREN BURKARD
3754 NW. 107th WAY
SUNRISE, FLORIDA 33351

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 BURKARD
3754 OLD 101st LANE
SUNRISE, FLORIDA 33351

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

28 day of MAY, 19 96.

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

Karen Burkard
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**

FILED

96 MAY 30 AM 9:58

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, 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: KB TRUSTED FOOD SERVICE OF So. FLORIDA
INC.

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

KALEN BURKARD
(NAME)
3754 NW 10TH WAY
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
SUNRISE, FLORIDA 33351
(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.

Kalen Burkard
(SIGNATURE)

5-28-96
(DATE)