

P96000079039

TRANSMITTAL LETTER

FILED

96 SEP 20 11 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: Lerros' Gourmet Italian Ices
(Proposed corporate name - must include suffix)

800001939698
-09/05/96--01056--005
*****70.00 *****70.00

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

W96-18858

FROM:

MARL E Ashe

Name (printed or typed)

1081 SW CORNELIA AVE

Address

Port St Lucie FL, 34953

City, State & Zip

561-336-7863

Daytime Telephone number

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

26
9-24-96



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 9, 1996

MARC E. ASHE
1081 S.W. CORNELIA AVENUE
PORT ST. LUCIE, FL 34953

SUBJECT: LERRO'S GOURMETT ITALIAN ICES
Ref. Number: W96000018858

We have received your document for LERRO'S GOURMETT ITALIAN ICES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 996A00041939

ARTICLES OF INCORPORATION

FILED
96 SEP 20 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

LEERRO'S GOURMET ITALIAN ICE ~~CO.~~ CO.

ARTICLE II PRINCIPAL OFFICE

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

321 SE Port ST LUCIE BLVD
Port ST LUCIE FL, 34953

ARTICLE III SHARES

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

500 SHARES @ \$ 2.00 SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARL Ashe
321 SE Port ST LUCIE BLVD
Port ST LUCIE FL, 34953

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):

MARK ASHE
321 SE PORT ST LUCIE BLVD
PORT ST LUCIE FL, 34953
Pres./Treasurer

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

3RD day of Sept, 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: Leraro's Gourmet Italian Ices CO.
2. The name and address of the registered agent and office is:

MARC ASHE
(NAME)
321 SE Pont ST LUCIE BLVD
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
Pont ST LUCIE FL 34953
(CITY/STATE/ZIP)

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36 SEP 20 AM 10:30
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]
(SIGNATURE)

9/3/96
(DATE)