

P97000000315

TRANSMITTAL LETTER

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

SUBJECT: Good Food Inc  
(Proposed corporate name - must include suffix)

500002040365--0  
-12/30/96--01001--003  
\*\*\*\*131.25 \*\*\*\*131.25

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: Douglas Fauls  
Name (Printed or typed)

205 Burlingame BLVD  
Address

TAVARES FL 32778  
City, State & Zip

(1) 352 243 3303  
Daytime Telephone number

FILED  
96 DEC 27 PM 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 2 #1 BSB

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

## 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:

Good Food Inc

### ARTICLE II PRINCIPAL OFFICE

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

DiDonato's  
205 Ourliegh BLVD  
TAUARES FL 32778

### 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:

Inge Fawls  
23-18 Elizabeth Ave  
Orlando FL 32804

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TALLAHASSEE, FLORIDA

**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):

Douglas Fauls 23-18 Elizabeth Ave  
Orlando FL 32804

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

26 day of December, 19 96.

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

Douglas Fauls  
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 Good Food Inc

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

Inge Fauls  
(NAME)

205 Burleigh BLVD  
(P. O. Box or Mail Drop) Box NOT ACCEPTABLE)

TAVARES FL 32778  
(CITY/STATE/ZIP)

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*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.*

Inge Fauls  
(SIGNATURE)

12-26-96  
(DATE)