# )17853

97 FEB 21 AM 9: 50

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

SECKE MAKY OF STATE TALLAHASSEE, FLORIDA

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: THEK SAID
Name (Printed or typed)

23279.46. 5-5. Address

ST. PETER SSULG F2. 33705

City, State & Zip

(813) 821-3068

Daytime Telephone number

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

### ARTICLES OF INCORPORATION

FILED

97 FEB 21 AM 9: 50

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

ARTICLE I NAME

The name of the corporation shall be:

TOM QUALITY MARKET INC.

ARTICLE II PRINCIPAL OFFICE

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

2327 9th. 57.5. ST. PETERSBURG, Fr. 33705

ARTICLE III SHARES

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TAREK SAID

2327 9th. 55. S.

ST. PETER SBURG, FL. 33705

#### 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):

O TAREK SAID

6350 ZOHL. ST. S.

ST. PETE., PL. 33712

(2) MUHAMAD TABER

10775 VILLAGE CLUB CR.

# 206

ST. PETE., PL. 33716

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

12 day of JAN. , 19 97.

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

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

97 FEB 21 AM 9: 50

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDAS TATEMENT 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.

The name of the corporation is:	1. The name of the corporation is:	TOM QUALITY MARKET, INC.
---------------------------------	------------------------------------	--------------------------

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

TAREK SAID

(NAME)

2327 946. ST. S.

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

ST. PETERSBURC Fd. 33705

(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.

(SIGNATURE) (DATE)

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