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#### (((H97000004256 B)))

TO: DIVISION OF CORPORATIONS FAX #: (904)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: NORTH MIAMI BABY FOOD PLACE, INC.

AUDIT NUMBER..... H97000004256

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS.. 1

PASES..... 3

CERT. COPIES.....Ø

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SECALTARY OF STATE TALLAHASDDE, FLORDA

# ARTICLES OF INCORPORATION OF

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

# ARTICLE I NAME

The name of the corporation shall be:

NORTH MIAMI BABY FOOD PLACE, INC

The principal place of business of this corporation shall be:

12387 NE 6th AVENUE

MIAMI FL 33161

#### ARTICLES II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 7,500 shares.

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

# **ARTICLE V OFFICERS DIRECTORS**

The name (s) and street address (es) of the initial officer (s) and director (s), if any, who shall hold office the first year of the corporation's existence or until their successor (s) is (are) elected, is (are):

GISLAINE JOSEPH 13725 NE 6TH AVENUE APT 107 MIAMI FL 33161

Prepared by: Comprehensive Business Services 7001 Biscayne Blvd.
Miami, Fl 33138
(305) 751-1226

# ARTICLE VI INCORPORATOR (S)

The name (s) and street address (es) of the incorporator (s) to this articles of incorporation is (are):

GISLAINE JOSEPH 13725 NE 6th AVENUE APT 107 N. MIAMI, FL 33161

Signature(s) of Incorporator(s)

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

97 MAR 12 PM 4: IG SECRLIARLY OF STATE TALLAMASCHE, FLORIDA

Pursuant to the provisions of Section 607,325, Florida Statues, 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:

NORTH MIAMI BABY FOOD PLACE, INC

2- The name and address of the registered agent and office is: GISLAINE JOSEPH

(POBOX NOT ACCEPTABLE) 13725 NE 6th AVENUE APT 107 N. MIAMI, FL 33161

(CITY/STATE/ZIP)

SIGNATURE

TITLE

DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES

SIGNATURE

DATE