037278 TAL LETTER SECRE, ALT OF STAT APR 24 FILEI Department of State PH Ο **Division of Corporations** Ņ P. O. Box 6327 0 Tallahassee, FL 32314 North Coast Salsa W. (Proposed corporate name - must include suffix) SUBJECT: 700002154117---5 -04/24/97--01110--001 *****78.75 *****78.75 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$78.75 **\$70.00 \$**122.50 \$131.25 **Filing Fee Filing Fee** Filing Fee Filing Fee, & Certificate & Certified Copy **Certified** Copy & Certificate **ADDITIONAL COPY REQUIRED** FROM: RON STack Name (Printed or typed) ALACHA 201 <u>ST,</u> Address Fernandina Beach, FL 32034 City, State & Zip (904) 261-8031 Daytime Telephone number

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

ML 4/25/97

ARTICLES OF INCORPORATION

The undersigned incorporator. for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NORTH COAST Salsa CO.

ARTICLE II PRINCIPAL OFFICE

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

201 Alachua ST.

Fernandina Beach, FL. 32034

ARTICLE III SHARES

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

2,500 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

RON STRAD 4830 NW 43rd ST. Gainesville, FL. 32606 ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Same as above

Signature/Incorporator

4	22	97	L
Date			

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

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/Registered Agent

AHASSEE, FL APR 24