# P97000040457

# TRANSMITTAL LETTER

FILED 97 MMY -2 /11 10: 26

4-24-97 MEDIN - 1100 191

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

SUBJECT: Ve	uding Concepts, sed corporate name - mustinclude su	Introduction of the second of
		600002163916C -05/02/9701106007 *****70.00 ******70.00
Enclosed is an original and	one (1) copy of the articles of	incorporation and a check
for: /	\$78.75	\$131.25
	Robert C. (	
FROM:	Name (printed or typed)	owan_
	•	6. 61
	8490 SW	83 54.
	Address	
	Miami FL	33143
	City, State & Zip	
	325-592-	<u>8777</u>
	Daytime Telephone number	
ROBERT C. COWAN GAVE  AUTHORIZATION BY PHONE TO  AND OF CORPORATION		
CORRECT NAME OF CORPORATION  DATE 5-7-97  DOC. EXAM JOHN NEDERL	-	
DOC. EXAM		

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

(N 5-7-97

# **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:

Vending Concepts, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

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

Five Hudsed (500)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):  Alida L. Gwad  8490 SW 83 Street  Miani FL 33143
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  27 day of April 1997.
Signature Signature

Articles of Incorporation Filing Fee - \$35

Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: Vending Concepts, In
2.	The name and address of the registered agent and office is:
	Alila L. COWAN
	(Name)
	8770 SW 72 St. #182
	(P.O. Box not acceptable)
	MiAni FL 33173
	(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)
Alida L. Cowan

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

়ৈ