

TRANSMITTAL LETTER

P97000052519

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 JUN 13 PM 1:41

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

SUBJECT:

SCALDED SCALLIONS, INC

(Proposed corporate name - must include suffix)

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:

JILL A YATES

Name (Printed or typed)

5949 SW 1ST CT

Address

CAPE CORAL FL 33914

City, State & Zip

941-540-4457

Daytime Telephone number

500002211385--1  
-06/13/97--01043--012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

RP  
6-13-97

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## 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:

SCALDED SCALLIONS, INC.

### ARTICLE II PRINCIPAL OFFICE

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

5949 SW 1ST CT  
CAPE CORAL FL 33914

### ARTICLE III SHARES

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

1000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JONATHAN J YATES  
5949 SW 1ST CT  
CAPE CORAL FL 33914

### ARTICLE V INCORPORATOR

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

JILL A. YATES  
5949 SW 1ST CT  
CAPE CORAL FL 33914

Jill A. Yates  
Signature/Incorporator

6-10-97

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

X Jonathan J. Yates  
Signature/Registered Agent

6-10-97

Date