# TRANSMITTAL LETTER

10-29-97

# Department of State

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

•			
SUBJECT:	Food For AU	Distributor	s, Ivc.
	(Froposed	corporate name - must includ	e suffix)
,			
Enclosed is an original a	and one(1) copy of the article	es 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 CO	PY REQUIRED
FROM: Richard Kelvin Name (Printed or typed)			
9304 Chelsed DR.N.			
	$\bigcirc$ $t$ $\downarrow$ $\downarrow$		

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

- 954- 723 -Daytime Telephone number

#### ARTICLES OF INCORPORATION

The u	idersigned incorporator, for the purpose of forming a corporation under the Flor	ida
		iuu
Busin	ess Corporation Act, hereby adopts the following Articles of Incorporation.	

ARTICLE	I	NAME

The name of the corporation shall be:

Food FOR ALL Distributors, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

9304 Chelsen DR. N. Plantation, FL 33324

### ARTICLE III SHARES

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

500 (Five Hundred)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Richard Kelvin 9304 Chelsea DR. N. Plattation II 333211

ARTICLE V INCORPORATOR

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

Richard Kelvin 9304 Chelser DR.N.

Plantation, FL 333>

Signature/Incorporator

10-29-97

(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 figural.

Signature/Registered Agent

10-29-97

Date