

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

600002429906--1 -02/13/38--01026--012 ****122.50 ****122.50

RE: BLENDRZ CAFE Incorporated

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50

This represents the cost of the filing fees, Certified Copy of Articles of Incorporation and the fee for the Registered Agent Designation for the above named corporation.

VERY TRULY YOURS.

Robert Guarriello

Daniel k Whitney

6845 Hidden Glade Place Sanford Florida 32771 407-330-2250 407-328-9501 BLENDRZ CAFÉ INC.

ARTICLES OF INCORPORATION

≪.	of	
BLE	NDRZ CAFE INCORPORATED	
	(name of corporation)	
The undersigned acting as the incorporators the following articles of incorporation for such co	of a corporation under the Florida Busin rporation:	ess Corporation Act adopt(s)
	TICLE I - CORPORATE NAME	THE STATE OF
The name of the corporation is:	VIDER CARE TAXON OF THE	Charles of the control of the contro
DLE!	NDRZ CAFE INCORPORATED	
		The second secon
	ARTICLE II - DURATION	
This corporation shall exist perpetually unles	s dissolved according to Florida law.	
	ARTICLE III - PURPOSE	
The corporation is organized for the purpose United States and the State of Florida.	of engaging in any activities or business	permitted under the laws of th
The corporation is authorized to issue100	EV - INITIAL PRINCIPAL OFFICE	-
The street address of the initial principal offic	e and, if different, the mailing address is	:
STREET ADDRESS DANIEL K WHITNEY		
6845 HIDDE	N GLADE PLACE	
CITY SANFORD	FLORIDA	ZIP 32771
Mailing address, if different		32771
STREET ADDRESS SAME AS ABOVE		
CITY	FLORIDA	ZIP
ARTICLE VI - INIT	TAL REGISTERED OFFICE AND A	· · · · · · · · · · · · · · · · · · ·
The street address of the initial registered		
NAME DANIEL K WHITNEY	or and initial log	stored agent at the office is:
ADDRESS	<u> </u>	
CITY CAMPORE	FI OPTOA	

FLORIDA

ZIP 32771

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have	_(2) directors initially. The number of directors may be
either increased or diminished from time to time by the	By-Laws, h	but shall never be less than one (1). The names and
addresses of the initial director(s) of the corporation are	as follows:	:

NAME	ROBERT GUARRIELLO			
ADDRESS	4314 MEETING PLACE DRIVE		-	
CITY	SANFORD	STATE	FLORIDA	ZIP ₃₂₇₇₃
NAME	DANIEL K WHITNEY			
ADDRESS	6845 HIDDEN GLADE PLACE			
CITY	SANFORD	STATE -	FLORIDA	^{ZIP} 32771
NAME		<u></u>		
ADDRESS		· .		
CITY		STATE		ZIP

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	ROBERT GUARRIELLO		
ADDRESS	4314 METTING PLACE DRIVE		
CITY	SANFORD	STATE FLORIDA	ZIP32773
NAME	DANIEL K WHITNEY		
ADDRESS	6845 HIDDEN GLADE PLACE		
CITY	SANFORD	STATE FLORIDA	^{ZIP} 32771
NAME			
ADDRESS			
CITY	Transition of the state of the	STATE	ZIP

The undersigned incorporator(s) h	ave executed these Articles	of Incorporation this	TWELTH	12
The undersigned incorporator(b) is				

day of FEBRUARY

19 98

ROBERT GUARRIELLO

(Signature) _

DANIEL K WHITNEY W350-171-56-384-0

(Signature)

(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



 BLENDRZ CAFI	INCORPORATED	
(name of c	orporation)	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at 6845 HIDDEN GLADE PLACE

has named ________ DANTEL K WHITNEY _______ located at the aforesaid address, as its registered agent to accept service of process within this

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

12-12-98

(Date)

state.