PAS CHANGETOR 35/

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

SUBJECT: Nort	th River Liquors Inc. (Proposed corpo	orate name - must include suf	fix)	
			1 00002444 -03/02/98 *****78.79	
Enclosed is an original	and one(1) copy of the articl	es of incorporation and a	check for :	
XX\$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: _	Philip O. Allen Name(P.O. Box 851	Printed or typed)	SECRETAR TALLAHASS	98 HAR -2
•		Address	TARY OF SJAT IASSEE, FLORI	-2 PH 4: 27
	Palmetto, Florida 3 City			27
	941-722-9555 Daytime	Telephone number		,
•				1

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the p. pose 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 River Liquors Inc.

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SECRETARY OF STATE AHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

5506 Bayshore Road Palmetto, FL 34221

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Philip O. Allen 5506 Bayshore Road Palmetto, Florida 34221

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Philip O. Allen

5506 Bayshore Road, Palmetto, FL 34221

Dale Schurfranz

Signature/Incorporator 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

Phin age	2123198
Signature/Registered Agent	Date