

P98000038995
TRANSMITTAL LETTER

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

SUBJECT: All Nature's Safeway, Corp.
(Proposed corporate name - must include suffix)

200002502002--3
-04/28/98--01007--015
*****78.75 *****78.75

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: Michael Jo. Walker
Name (Printed or typed)

453 22nd Ave. South East
Address

St. Petersburg, Florida 33705
City, State & Zip

813- 895-8082
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 APR 28 AM 7:54

FILED

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: All Nature's Safeway, Corp.

ARTICLE II PRINCIPAL OFFICE

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

453 22nd Ave. S.E.,
St. Petersburg, Florida 33705

ARTICLE III SHARES

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

5,000 - Five Thousand

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

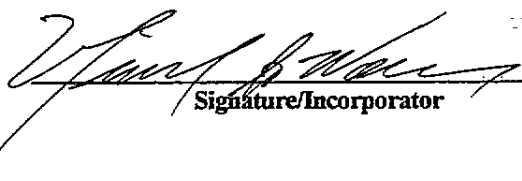
The name and Florida street address of the initial registered agent are:

Michael Jo. Walker
453 22nd Ave S.E.
St. Petersburg, Fl. 33705

ARTICLE V INCORPORATOR

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

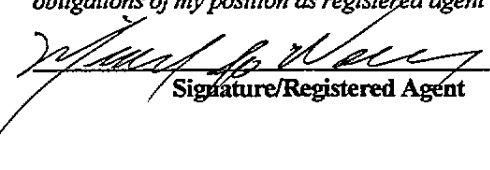
Michael Jo. Walker
453 22nd Ave S.E.
St. Petersburg, Florida 33705


Signature/Incorporator

4-21-98
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


Signature/Registered Agent

4-21-98
Date

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TALLAHASSEE, FLORIDA