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TO: DIVISION OF CORPORATIONS

FAX #:

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FROM: AL CLARK

ACCT#:

072100000173

CONTACT: AL CLARK

PHONE: (813)398-6011

FAX #:

(813) 528-7222

NAME: 9TH AVENUE PRODUCE, INC.

AUDIT NUMBER..... 198000008695

DOC TYPE......FLORIDA PROFIT CORPORATION OR P. 4

CERT. OF STATUS...O

PAGES..... 3

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SECRETARY OF STATE
AND SEFE FLORID

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be

9 TH Street Produce, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3045 9th Street N.

St. Petersburg, FL. 33704

ARTICLE III SHARES

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

1000 SHARES NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

prepared by:

Name: Alfred Clark

Address 8668 Park Blyd . Ste A

Seminole, Fl. 33777

PH# 813-398-6011

Accounting & Tax Help, INC. 8668 PARK BLVD Suite .A SEMINOLE, Florida 33777

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ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Alfred Clark 8668 Park Blud. Ste A Seminole, FL, 33777

			uted these Articles of I	
	day of	May	, 19 <u>98</u> .	
(An additi	ional article	must be added if an	effective date is request	ted.)
V	Alex	U Clock Signature		
λ		Signature	-	
·		Signature	;	
_		Signature		

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

l.	The name of the corpora	tion is:			
	0-11	515.1	Denduca	Time	

2. The name and address of the registered agent and office is:

Accounting & Tax Help, INC. (Name)

8668 PARK BLVD., Suite A (P.O. Box not acceptable)

SEMINOLE, Florida 33777 (City/State/Zip) 98 MAY -7 PM 2: 01
SECRETARY OF STATE
TALLAHASSEE FLORID

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.

Ol Clah DATE 5-7-98
(Signature)
PRESIDENT

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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