

TRANSMITTAL LETTER

P98000064106

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

SUBJECT: Titimari Food Products, Inc.
(Proposed corporate name - must include suffix)

800002593468--0
-07/20/98--01114--018
*****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: Roberto Osorio
Name (Printed or typed)

5360 Southwick Dr
Address

Tampa, Florida 33624
City, State & Zip

(813) 963-6019
Daytime Telephone number

FILED
98 JUL 20 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. SMITH JUL 21 1998

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:

Titimari Food Products, Inc.

ARTICLE II PRINCIPAL OFFICE

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

*5360 Southwick Dr.
Tampa, Florida 33624*

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

*Roberto Osorio
5360 Southwick Dr
Tampa, FL 33624*

ARTICLE V INCORPORATOR

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

*Roberto Osorio
5360 Southwick Dr.
Tampa, FL 33624*


Signature/Incorporator

6-27-98
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

6-27-98
Date