## Department of State Division of Corporations P. O. Poy 6327

P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	D. 4. B. Coffee En Proposed corpor	terprises Inate name - must include sur	NC 1	_
•		And the second s	00002611 -08/10/980 *****70.00	605 1060011 *****70.00
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :				
Filing Fe		\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: Bonnie Fimiano				
	Name (Pi	rinted or typed)	SEI SEI	5
	589 Slippery Ra	ock Road  Address	أبينو سندر	

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

Daytime Telephone number





## 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.

The name of the corporation shall be:
D. + B. Coffee Enterprises Inc.
The principal place of business and mailing address of this corporation shall be:  589 Shippen Rock Rd. Woston FL. 33327
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  \[ \lambda \text{DOO} \leftrightarrow \text{ROO}
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:  589 Slippery Rock Road. Weston FL.33327
ARTICLE V INCORPORATOR  The name and address of the incorporator to these Articles of Incorporation are:  Doninick and Bonnie Fimiano  589 Slippery Rock Rd.  Weston Fl. 33327
Signature/Incorporator  Date  Signature/Incorporator

(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

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