# 2000 71166

## Carregal Accounting Service

6115 North Armenia Avenue Tampa, Florida 33604 (813)877-6371 FAX(813)877-2895 carregal@acm.org

27 July 1998

000002613500--4 -08/12/98--01012--009

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

TO WHOM IT MAY CONCERN:

ENCLOSED PLEASE FIND THE ARTICLES OF INCORPORATION FOR Deli Plus, Inc.. AS WELL AS A CHECK FOR 122.50 COVERING THE VARIOUS FEES.

PLEASE RETURN THE CERTIFIED COPY OF THE ARTICLES TO MY ATTENTION AT 6115 N. ARMENIA AVENUE, SUITE B, TAMPA, FLORIDA 33604.

SHOULD YOU HAVE ANY QUESTIONS REGARDING THIS MATTER, PLEASE FEEL FREE TO CALL

THANK YOU

d:\msoffice\winword\documents\corporations\incorp.doc

## a. Y

ARTICLES OF INCORPORATION
OF
Deli Plus, Inc.

The undersigned subscribers, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following Articles of Incorporation.

#### ARTICLE I: NAME

The name of the corporation shall be:Deli Plus, Inc.
The principal place of business of this corporation shall be 1605 E. 7th Avenue Tampa, Florida 33605

98 AUG 12 PM 12: 34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II: TERM OF EXISTENCE

The duration of this corporation is perpetual.

#### ARTICLE III: NATURE OF BUSINESS

This corporation is organized for the purpose of operating a business, and transacting of any and all lawful business for which corporations may be incorporated under the laws of the United States, the State of Florida or any other state, country, territory or nation.

#### ARTICLE IV: CAPITAL STOCK

The corporation may issue FIVE HUNDRED (500) shares of voting common stocks of par value one dollar (\$1.00) each share with preemptive rights preserved.

#### ARTICLE V: ADDRESS & REGISTERED AGENT

The name and address of the initial registered agent and office of the corporation is: Amain Saleh Muthana 4902 N. MacDill Avenue Tampa, Florida 336143

#### ARTICLE VI: DIRECTORS

The corporation shall have no directors.

AFPROVED

### ARTICLE VII: OFFICERS AND INCORPORATORS

The names and addresses of the officers and incorporators of this corporation are:
Amain Saleh Muthana <u>Pres, Treas.</u> 4902 N. MacDill Avenue Tampa Florida 336143
Tammy Mitchell Vice Pres. 3716 W. Horatio Avenue Tampa Florida 33609
There shall be one initial officer of the corporation. The number of the officers should be established by the bylaws and could be changed from time to time, but always should be at least one officer, the President.
The incorporators of this corporation are:
Amain Saleh Muthana Pres, Treas. 4902 N. MacDill Avenue Tampa Florida 336143
Tammy Mitchell Vice Pres. Famy Witchell 3716 W. Horatio Avenue Tampa Florida 33609
State of Florida County of Hillsborough
BEFORE ME, a Notary Public duly authorized in the state of Florida and county of Hillsborough, personally appeared the above mentioned subscriber(s) to me known to be the person(s) described as the subscriber(s) in and who executed the foregoing Articles of Incorporation and acknowledged before me that they executed the same and subscribed to these Articles of Incorporation.
WITNESS MY HAND and official seal in the County and State named above this 27 July 1998
Est-10) alson -
Notary Public, State of Fl at Large

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, 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.

- 1. The name of the Corporation is: Deli Plus, Inc.
- 2. The name and address of the registered agent and office is:

Amain Saleh Muthana 4902 N. MacDill Avenue Tampa, Florida 336143

Signature:

Title: Pres, Treas.

Date: 7-27-98

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 STATUES 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: =

Date:

98 AUG 12 PM12: 3

APPROVED-AND FILED