# Date 9/23/98

Secretary of State Division of Corporations P. O. Box 6327 Talahassee, FL 32314  Re:  A JEWE Full (name of	4000026491247 -09/25/9801065010 ****122.50 ****122.50  Sanice Cotening, Inc. corporation)
Gentlemen: Enclosed please find the original and one copy of A amount of \$122.50. This represents the cost of the Filing Fees, Cert Registered Agent Designation for the above nar	ified Copy of Articles of Incorporation and Fee for
	Patricia Hughes (individual's name)  A JEWEL FULL SERVICE CATERING
	(name of corporation)  MAILING ADDRESS OF CORPORATION  7222 Linda DRIVE  Jacksonville, FL 32208  REF, FLORIDE  REF

(904) Area Code

QN 9-25-98

Ext.

Number

# ARTICLES OF INCORPORATION

A JEWEL FULL SERVICE CO	Atering, Inc.	
(name of co	rporation) '	
The undersigned subscriber(s) to these Articles of Incorporation under the laws of the State of Florida.	ion, natural person(s) competent	to contract, hereby form a
ARTICLE I - COR	PORATE NAME	FAR SE
The name of the corporation is:  A JEWEN Full SERVICE	E Catering, Inc	ASSE P III
ARTICLE 11 -	DURATION	PAN IZ:
This corporation shall exist perpetually unless dissolved ac	ccording to Florida law.	927 8 8
ARTICLE III	- PURPOSE	OF A
The corporation is organized for the purpose of engaging in United States and the State of Florida.	any activities or business permi	tted under the laws of the
ARTICLE IV - C	APITAL STOCK	
The corporation is authorized to issue 1000	shares ( ) of _	
Dollar(s) (\$ 1.00 par value Common S	tock, which shall be designated	Common Shares."
ARTICLE V - INITIAL REGIST	TERED OFFICE AND AGENT	•
The principal office, if known, or the mailing adress of the	he corporation is:	
NAME		
ADDRESS 7222 LINDA DRIVE		
сіту Јах	FLORIDA	ZIP 32208 _
The name and street address of the Initial Registered Ag	gent of this Corporation is:	_
NAME Patricia E HUGHES		
ADDRESS 9051 Adams AVENUE		
CITY Jax	FLORIDA	ZIP 32208
ARTICLE VI - INITIAL I		<u></u>
This corporation shall have SENEN ( increased or diminished from time to time by the By-Law addresses of the initial director(s) of the corporation are	) directors initially. The number vs, but shall never be less than as follows:	one (1). The names and
NAME )		
ADDRESS ()		
CITY OUT	STATE	ZIP
NAME ( C C.		
ADDRESS (COLV		
CITY	STATE	ZIP
NAME		
ADDRESS		

ARTICLE VII - INCORPORATORS The names and addresses of the incorporators signing these Articles of Incorporation are as follows: 14110R 2ames Effing ham RD ADDRESS ZIP 32208 STATE ~)Qx CITY alone 4566Y NAME ADDRESS STATE FL CITY HuGHES BICIO NAME Adams AVENUE ADDRESS Jax CITY IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this \_\_\_\_ (Seal) (Seal) (Seal) STATE OF FLORIDA SS COUNTY OF before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that \_\_\_\_\_ executed these Articles of Incorporation. IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this (Notary Public, State of Florida at Large) (Notary Seal)

My Commission expires:

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME Sam HUGHES		_
GARA Callan DI Da	ς	
70	STATE FL	ZIP 32216
CITY OUX	SIAIE   C	
NAME KOTREIL HUGHES ADDRESS 8352 CENTURY PT D	3 5	
3	Ti	ZIP 32216
CITY JAX	STATE +L	Ziroolo / C
NAME THERESO Williams	>	
ADDRESS 1735 BROOKER KD		ZIP 32207
стту Зах	STATE +L	ZIP Jold ()
IN WITNESS WHEREOF, the undersigned sub	escriber(s) have executed these Articles of	Incorporation this
day of, 19		•
day or		
		(Seal)
		(Scal)
		(Soar)
		(Seal)
STATE OF FLORIDA )	SS	
COUNTY OF		
before me, a Notary Public authorized to take	acknowledgements in the State and Count	y set forth above, personally
appeared		
known to me and known to be the person(	s) who executed the foregoing Articles	of Incorporation, and who
acknowledged before me thate		•
		·
IN WITNESS WHEREOF, I have hereunto affin	xed my hand and seal, in the State and Cour	nty aforesaid, this
day of, 19		- <u> </u>
way ve	•	
(Notary Seal)	(Notary Public, State of Florida at Large)	
	My Commission expires:	-

ARTICLE VII - INCORPORATORS . The names and addresses of the incorporators signing these Articles of Incorporation are as follows: NAME Launa ADDRESS ZIP32206 Зαх CITY STATE NAME **ADDRESS** CITY STATE ZIP NAME **ADDRESS** ZIP STATE CITY IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this day of \_\_\_\_\_\_\_, 19\_\_\_\_. (Seal) (Scal) (Seal) STATE OF FLORIDA SS COUNTY OF before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that \_\_\_\_\_ executed these Articles of Incorporation. IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this day of \_\_\_\_\_\_, 19\_\_\_\_. (Notary Public, State of Florida at Large)

My Commission expires:

(Notary Seal)

# CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

## CERTIFICATE OF REGISTERED AGENT

OF

A JEWEL FULL SERVICE CATERING	TALL	9g 20	- Tarker
(name of corporation)	圣严	Ü	200
	155 155 155	S	3
	W.C.	PH IZ	
	FLO	LZ.	· Committee
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is subn	nitte (5)	<u> </u>	
The above corporation, desiring to organize under the laws of the State of Florid	10.00		
its registered office as indicated in the Articles of Incorporation			
at 7222 LINDA DAINE			-
Jacksonville, FL 32208			
has named A JEWEL Full SERVICE COTERING			÷
located at the aforesaid address, as its Registered Agent to accept service of p	rocess		
within this state.			

### ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.