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P98000089943

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

SUBJECT: 600	RMET ENTR (Proposed corp	EES TO GO sorate name - must include suf	OF DESTIN	INC.
		Table American	70000266: -10/21/98- ******78. ₇ 5	3067 -01049005 *****78.
Enclosed is an original ar	nd one(1) copy of the artic	cles 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: KEVIN ADAIR
Name (Printed or typed)

214 DOLPHIN ESTATES CT.
Address

DESTIN FL 32541
City, State & Zip

850 - 837 - 3568
Daytime Telephone number

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

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

The name of the corporation shall be:

GOURMET ENTREES

ARTICLE II PRINCIPAL OFFICE

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

214 DOLPHIN ESTATES

DESTIN , FLORIDA

ARTICLE III SHARES

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

1000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

KEVIN ADAIR

214 DOLPHIN ESTATES

DESTIN FLORIDA INCORPORATOR

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

KEVIN ADAIR

DOLPHIN ESTATES CT.

DESTIN, FL. 32541

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