

TRANSMITTAL LETTER

P 9900000 4684

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

800002739658--1
-01/13/99--01052--018
*****78.75 *****78.75

SUBJECT: ELICIE SUPERMARKET

(Proposed corporate name - must include suffix)

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 of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: ELIANA ZAMOR
Name (Printed or typed)

6311 SW 4TH PLACE
Address

MARGATE, FL 33068
City, State & Zip

(954) 761-9739
Daytime Telephone number

FILED
99 JAN 13 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BROCK JAN 15 1999

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 NAME

The name of the corporation shall be:

ELICIE SUPERMARKET, INC.

ARTICLE II PRINCIPAL OFFICE

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

515 NE 13TH STREET
FORT LAUDERDALE, FL 33304

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ELIANA ZAMOR
6311 SW 4TH PLACE
MARGATE, FL 33068

ARTICLE V INCORPORATOR

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

ELIANA ZAMOR
6311 SW 4TH PLACE
MARGATE, FL 33068

Eliana Zamor
Signature/Incorporator

01-07-99

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

Eliana Zamor
Signature/Registered Agent

01-07-99

Date

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TALLAHASSEE, FLORIDA