P9900037362

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

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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 ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: Imad A. El Ghali Name (Printed or typed)					
4376 Rosewood Avenue Address					
TAcksonville, Fl 32207 City, State & Zip FC 9					
City, State & Zip PR					
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NOTE: Please provide the original and one copy of the articles.

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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	EFFECTIVE DATE
The name of the corporation shall be:	5-15-99
Golden Delight Distributors, I	mc.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corp	poration shall be:
4326 Rosewood Avenue	
Jadesonville, 7/32207	- · · · · - · · - · · - · · - · · · - · · · · - ·
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorize	ed to have outstanding at any one time is:
One Hundred	Fig. 3
ARTICLE IV INITIAL REGISTERED AGENT A	ND STREET ADDRESS
The name and Florida street address of the initial registered age	
IMAd A. El Ghali	Sin
4326 Rosewood Avenue	
Jacksonville, Fl 32207 ARTICLE V INCORPORATOR	OF E
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of	Incorporation are:
-	meorporation arc.
Same as Above	and the second s
ARTICLE VI EFFECTIVE DATE The effective Dyre Requested To Start	is: May 15, 1999.
	4/21/99
Signature/Incorporator	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

Signature/Registered Agent

Date