

P99000054472
TRANSMITTAL LETTER

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

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-06/14/99--01111--005
*****89.50 *****87.50

SUBJECT: ATLAS FOOD SUPPLIER CORP
(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

☒ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

89.50 As of 10/99
ADDITIONAL COPY REQUIRED

FROM: MARIO I. MANTILLA
Name (Printed or typed)

7599 NW 20th COURT
Address

SUNRISE, FL. 33313
City, State & Zip

(954) 742-9113
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUN 14 PM 4:40

FILED

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

ajc 6/15

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:

ATLAS FOOD SUPPLIER CORP

ARTICLE II PRINCIPAL OFFICE

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

7599 NW 20th COURT
SUNRISE, FL 33313

ARTICLE III SHARES

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

100 SHARES COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SILVIA JOHNS
323 IVES DAIRY ROAD, APT. #8
NORTH MIAMI, FL 33179

ARTICLE V INCORPORATOR

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

MARIO I. MANTILLA
7599 NW 20th COURT
SUNRISE, FL. 33313



Signature/Incorporator

JUNE 5, 1999

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

6/10/99
Date

FILED
99 JUN 14 PM 4:40
STATE OF FLORIDA
TALLAHASSEE, FLORIDA