HUBCO INCORPORATIONS

PAGE 01

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## Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:

Division of Corporations

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From:

Account Name : HUBCO

Account Number : 104662003400

Phone : (516)935-3940 Fax Number : (516)935-3088

2003400 935-3940 935-3088

# FLORIDA PROFIT CORPORATION OR P.A.

key west gourmet, inc.

| Certificate of Status | 1       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

PAGE 02

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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Key West Gourmet, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Key West Gourmet, Inc.

291 FRONT STREET KEY WEST, FL 33040

ARTICLE III SHARES

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

1500 SHARES at NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARK QUINN 1013 MARGARET STREET KEY WEST, FL 33040

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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HUBCO INCORPORATIONS

PAGE 03

H99000016332

### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

VALERIE BENARD 1307 PINE STREET KEY WEST, FL 33040

| The under | ndersigned incorporator(s) has(have) executed these Articles of Incorporation this |      |       |    |  |
|-----------|--|------|-------|----|--|
| 2nd       | day of   | July | _ 19_ | 99 |  |
|           |  |      |       |    |  |

VALERIE BERNARD

Signature

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

| e name and address of t | he registered agent and office is:         |
|-------------------------|--|
|                         | MARK QUINN                                 |
|                         | Name                                       |
|                         | 1013 MARGARET STREET                       |
|                         | (P.O. Box or Mail Drop Box NOT Acceptable) |
|                         | KEY WEST, FL 33040                         |
|                         | (City / State / Zip)                       |

agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the

obligations of my position as registered agent.

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Signature