

TRANSMITTAL LETTER

P99000083996

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

500002990945--9
-09/20/99--01075--020
*****78.75 *****78.75

SUBJECT: SKY SPRING WATER INC.
(Proposed corporate name - must include suffix)

FILED
99 SEP 20 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Rosalie Nassetta
Name (Printed or typed)

8015 N.W. 100th Way
Address

TAMARAC, FL. 33321
City, State & Zip

954-720-8960
Daytime Telephone number

F. CH23311 SEP 22 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: SKY SPRING WATER, INC.

ARTICLE II PRINCIPAL OFFICE

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

10401 N.W. 53rd ST. Sunrise, FL 33351

ARTICLE III SHARES

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

(1,000) One Thousand

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Vincent Nassetta
8015 N.W. 100th Way Tamarac, FL 33321

ARTICLE V INCORPORATOR

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

Rosalie Nassetta
8015 N.W. 100th Way
Tamarac, FL 33321

Rosalie Nassetta
Signature/Incorporator

8/27/99
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.

Vincent Nassetta
Signature/Registered Agent

8-27-99
Date

99 SEP 20 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED