

Pod000030667
TRANSMITTAL LETTER

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

FILED
02 MAR 20 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Bloomin Crazy, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

EFFECTIVE DATE
03-15-02

FROM: Steven R. Honzik
Name (Printed or typed)

1007 N. Federal Hwy # 57
Address

FT. Lauderdale, FL 33304
City, State & Zip

954-728-9486
Daytime Telephone number

800005137528--7
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*****87.50 *****87.50

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

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purposes 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:

BLOOMIN CRAZY, INC.

ARTICLE II PRINCIPAL OFFICE

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

1007 N. Federal Highway, Suite 57
Ft. Lauderdale, Florida 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 is:

Steven R. Honzik
1007 N. Federal Highway, Suite 57
Ft. Lauderdale, Florida 33304

ARTICLE V INCORPORATOR

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

Steven R. Honzik
1007 N. Federal Highway, Suite 57
Ft. Lauderdale, Florida 33304

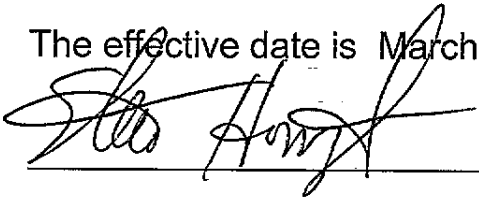
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ARTICLE VI EFFECTIVE DATE

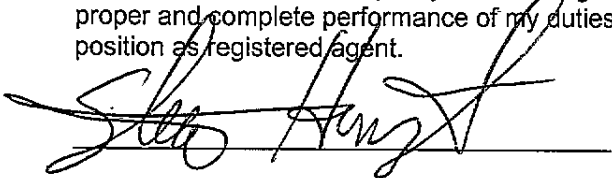
The effective date is March 15, 2002



Signature/Incorporator

Date

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