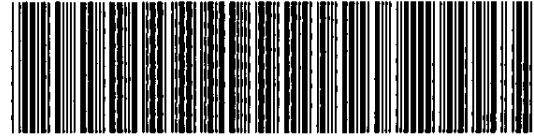


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
9/15

**COVER LETTER**

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

**SUBJECT: RIZZO PRETZELS, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: MARK T. HAMILTON  
Name (Printed or typed)

2 S. WHITNEY ST. - P.O. BOX 284  
Address

GRAYSLAKE, IL 60030  
City, State & Zip

(847)223-1500  
Daytime Telephone number

MHamilton@grayslakelaw.com  
E-mail address: (to be used for future annual report notification)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

**RIZZO PRETZELS, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**c/o LEONARD RIZZO  
5635 NOTTING HILL ROAD  
GURNEE, IL 60031**

Mailing address, if different is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**THE TRANSACTION OF ANY ANY OR ALL LAWFUL BUSINESS FOR WHICH  
CORPORATIONS MAY BE INCORPORATED UNDER FLORIDA LAW.**

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **LEONARD RIZZO**  
Address: **PRESIDENT & SOLE DIRECTOR  
5635 NOTTING HILL ROAD  
GURNEE, IL 60031**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **RICHARD D. CIMINO**  
Address: **9130 GALLERIA COURT - SUITE 311  
NAPLES, FL 34109**

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: **MARK T. HAMILTON**  
Address: **2 S. WHITNEY ST - P.O. BOX 284  
GRAYSLAKE, IL 60030**

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*Richard D. Cimino*  
\_\_\_\_\_  
Required Signature/Registered Agent

9/12/2011  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

*Mark T. Hamilton*  
\_\_\_\_\_  
Required Signature/Incorporator

9/13/11  
Date