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C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

904-222-1092

CORPORATION(S) NAME

80000178722B

-04/19/96--01047--025

\*\*\*\*\*78.75 \*\*\*\*\*78.75

416 Avenida Menendez, Inc.

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Hz 4114

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| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger              |
| <input type="checkbox"/> NonProfit                 |   |  |
| <input type="checkbox"/> Limited Liability Company |   |  |
| <input checked="" type="checkbox"/> Foreign        | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other               |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A.      |
| <input type="checkbox"/> Certified Copy            | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name     |
|  |   | <input checked="" type="checkbox"/> CUS/ G/S |
| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30          |
| <input checked="" type="checkbox"/> Walk In        | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up  |
| <input type="checkbox"/> Mail Out                  |   |  |

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# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  
STATE OF FLORIDA:

1. 46 Avenida Menendez, Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Alabama

(State or country under the law of which it is incorporated)

3. 631168067

(FEI number, if applicable)

4. April 10, 1996

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

7. 46 Avenida Menendez Street, St. Augustine, Florida 32084

(Current mailing address)

8. Restaurant

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: L. John Arbizzani

Office Address: 409 Porpoise Point Drive

St. Augustine, Florida, 32080

(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



(Registered agent's signature) (Officer)

L. John Arbizzani - President

(Type Name and Title of Officer)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Director: L. John Arbizzani

Address: 409 Porpoise Point Drive

St. Augustine, Florida 32084

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: L. John Arbizzani

Address: 409 Porpoise Point Drive

St. Augustine, Florida 32084

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Alice J. Vogwill

Address: 8295 Padgett Switch Road

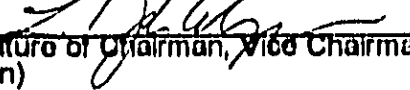
Irvington, Alabama 36544

Treasurer: Alice J. Vogwill

Address: 8295 Padgett Switch Road

Irvington, Alabama 36544

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. L. John Arbizzani, President  
(Typed or printed name and capacity of person signing application)

# STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that the domestic corporation records on file in this office disclose that 46 Avenida Monendez, Inc. incorporated in Mobile County, Irvington, Alabama on April 10, 1996. I further certify that the records do not disclose that said 46 Avenida Monendez, Inc. has been dissolved.

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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

April 17, 1996

Date

*Jim Bennett*

Jim Bennett

Secretary of State