	000001431 TRANSMITTAL LETTER
To: Registration Section Division of Corporations	-
	<u>'s Subs &amp; Salads, Inc.</u> Name of corporation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by For "Certificate of Existence," and ch transact business in Florida.	reign Corporation for Authorization to Transact business in Florida," eck are submitted to register the above referenced foreign corporation to
Please return all correspondence of	concerning this matter to the following: 500003172615- -03/16/00010540 ******87.50 ******8
	Judson H. Orrick
	(Name of Person)
	Marie Claire's Subs & Salads
	(Firm/Company)
	1447 East Lafayette St. (Address) Tallahassee, FL 32301
	Tallahassee, FL 32301 (City/State/Zip)
Should you need to call someone c	-
Judson H. Orrick	at ( 850 ) 878-6358
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations 409 E. Gaines St.	Division of Corporations
Tallahassee, FL 32399	Tallahassee, FL 32314

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

	WITH SECTION 607.1503. FL EIGN CORPORATION TO TR					MITTED B	ALLE CI
(Name of corpor words or abbreviat	s Subs & Salads, Inc. ation: must include the word "I ions of like import in language r partnership if not so contained	as wil	I clearly ind	icate that it is	vy", "CORPOR a corporation in	ATTON", or stead of a	CURPORATION
2. Nevada				59-3624633			
(State or country	under the law of which it is inc	corpor	ated)	(FEI	number, if appl	icable)	
4. January 21, 20 (Date	000 of Incorporation)	5	N/A (Duration:	Year corp. wi	Il cease to exist	or "perpetual")	
6. <u>February 14.</u> (Date first transact	2000 ed business in Florida. If corporatio (SEE SECTIONS 607	on has	not transacte	d business in Fl	orida, insert "upo		
	Lafavette Street. Tallahassee. (Prin Lafayette Street, Tallahassee	cipal	office addre	<u>ss)</u>			•
	(Curr f deli style foods; (subs, salad	rent m	ailing addre		ds etc.)		
(Purpose(s	a) of corporation authorized in h	nome s	state or cour	try to be carri	ed out in state of		
Name:	Judson H. Orrick	<u> </u>		<u>,</u> ,	· ·		
Office Address:	1447 East Lafayette St.				·		
	Tallahassee			,Florida	32301 (Zip Code)		
10. Registered ag	gent's acceptance:						
designated in this ap further agree to con	as registered agent and to accept plication, I hereby accept the app ply with the provisions of all stat ith and accept the poligations of i	oointm utes re	ent as registe lative to the	ered agent and proper and con	agree to act in thi	is capacity. I	

(Registered agent's signature)

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 business addresses of officers and/or directors:	- Cr
A. DIRECTORS	
Chairman: James D. Pelkey	
Address: 1447 East Lafayette St.	S OFF
Tallahassee, Fl 32301	C. RATE
Vice Chairman:	58 OHS
Address:	_
Director: _Judson H Orrick	<b>_</b> .
Address: 1304 Golf Terrace	
Tallahassee, Fl. 32301	_
Director: Andrea Jenkins	<u> </u>
Address: 5755 Cypress Circle	<u> </u>
Tallahassee, FL 32303	
B. OFFICERS	
President: Judson H. Orrick	_
Address:1304 Golf Terrace Dr.	
Tallahassee, Fl. 32301	<u> </u>
Vice President: James D. Pelkey	
Address: 1825 Salmon Dr.	<b></b>
Tallahassee, FI. 32303	
Secretary: Andrea Jenkins	· · ·
Address: 5755 Cypress Cr.	_
Tallahassee, Fl. 32301	_
Treasurer: James D. Pelkey	<b></b>
Address: 1825 Salmon Dr.	_
Tallahassee, Fl. 32303	_
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/ or directors.	
13. AMARTAS AS - DRESIDENT	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	_
14. Judson H. Orrick, President (Typed or printed name and capacity of person signing application)	<u> </u>

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