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

Franks of Jax, Inc.

Subject

00 JAN -7 AM 8: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Enclosed is	an original and one (1) copy of ⊠ \$78.75 Filing Fee & Certified Copy	\$122.50	ation and a check for \$131.25 Filing Fee, Certified Copy & Certificate (ADDT'L COPY REQ'D)	: eg:
FROM:	Philip K. Akalp			1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	26500 West Agoura Road, #57 Calabasas, California 91302	2	723	-

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NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

DH 1/13/2000

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ARTICLES OF INCORPORATION OF

Franks of Jax, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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: Franks of Jax, Inc.

ARTICLE II PRINCIP<u>AL OFFICE</u>

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

1177 Second Ave.

New York, New York 10021

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,500 shares at \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Bernice Traynor

220 SE 3rd Ave.

Pompano Beach, Florida 33060

ARTICLE V INCORPORATOR

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

Philip K. Akalp

26500 West Agoura Road, #572

Calabasas, California 91302

Phikly K. Akalp, 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.

Bernice Traynor, Registered Agent

Date