

Department of State Division of Corporations P. 0. Box 6327 Tallahassee, FL 32314

SUBJECT:

ORCHID ISLE PIZZERIA, INC.

(Proposed corporate name - must include suffix)

\$78.75

☎ \$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

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*****87.50 *****87.50

ADDITIONAL COLT TESQUE

Enclosed is an ori&al and one(1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

____ \$78.75 Filing Fee & Cerfificate of Status

FROM:

Name BRUCE J. EDWARDS

Address: 3900 DOW ROAD

City, State & Zip WEST MELBOURNE, FL 32934

Daytime Telephone number 321-255-2230 × ii

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

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SECHETARY OF STATE
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The undersigned incorporator, for the purpose offortning a corporation under the Florida Business Corpora adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be: ORCHID ISLE PIZZERIA, Incorporated

ARTICLE 11

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 9300 N A1A, # 102, Vero Beach,

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 shares at \$1.00 per par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS. The name and Florida street address of the initial registered agent are: Bruce J. Edwards, 3900 Dow Road, W. Melbourne, FL 32934

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Bruce J. Edwards, 3900 Dow Road, West Melbourne, FL 32934

(An additional article must be added if an effective date is requested.)

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. Ifurther 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