

P00000018138

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Pam's Country Restaurant II,
Inc.

FILED

00 FEB 21 PM 12: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*****70.00 *****70.00

- ☒ Art of Inc. File photo
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☒ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

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00 FEB 21 AM 11: 01
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

PH 2/21/2000

ARTICLES OF INCORPORATION
OF
PAM'S COUNTRY RESTAURANT II, INC.

FILED
00 FEB 21 PM 12: 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be:

PAM'S COUNTRY RESTAURANT II, INC.

The principal place of business of this corporation shall be:

11610 & 11612 U.S. 19 NORTH, PORT RICHEY, FL 34668.

The mailing address of this corporation shall be:

11610 & 11612 U.S. 19 NORTH, PORT RICHEY, FL 34668.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage in or transact any or all-lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock have \$1.00 per value per share.

ARTICLE IV. TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V. OFFICERS DIRECTORS

This corporation is to have two directors and two officers, initially. The name and street address of the initial directors and officers who shall hold office for the first year of the corporation's existence, or until their successors are elected or appointed are:

***James Kalathakis
President***

***2716 Boxelder Drive
Port Richey, FL 34668***

***Pam Kalathakis
Secretary***

***2716 Boxelder Drive
Port Richey, FL 34668***

ARTICLE VI. INCORPORATOR

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

James Kalathakis

***2716 Boxelder Drive
Port Richey, FL 34668***

IN WITNESS WHEREOF, the under signed incorporator has executed these
Articles of Incorporation this 17th day of FEB, 2000.

Signature of Incorporator

James Kalathakis
Incorporator

STATE OF FLORIDA
COUNTY OF PINELLAS

THE FOREGOING instrument was acknowledge and sworn to before me
this 17th day of FEB, 2000, by PAM'S COUNTRY
RESTAURANT II, INC. of JAMES KALATHAKIS.

K432-160-59-371-0

Notary Public

Dori A. Lindsley



Dori A. Lindsley
Commission # CC 821341
Expires Apr. 15, 2003
Bonded Thru
Atlantic Bonding Co., Inc.

CERTIFICATE DESIGNATING

FILED

REGISTERED AGENT / REGISTERED OFFICE

00 FEB 21 PM 12: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provision of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida .

1. The name of the corporation is:

PAM'S COUNTRY RESTAURANT II, INC.

2. The name and address of the registered agent and office is:

Name: *JAMES KALATHAKIS*

Address: 11610 & 11612 U.S. 19 NORTH

City: PORT RICHEY

State: FLORIDA

Zip Code: 34668

SIGNATURE: 

TITLE: PRESIDENT

DATE: *2/17/00*

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE: 

DATE: *2/17/00*