

TRANSMITTAL LETTER

P00000023746

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

SUBJECT: Net-Diner, Inc.
(Proposed corporate name - must include suffix)

700003153177--8
-03/01/00--01082--015
*****78.75 *****78.75

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Kimberly A. Johns
Name (Printed or typed)

P.O. Box 16264
Address

Clearwater, Fl. 33766
City, State & Zip

727-791-0913
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAR -1 AM 10:52

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

gf 3/8/00

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Net-Diner, Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2406 Hazelwood Lane
Clearwater, Fl. 33763 / P.O. Box 16264
Clearwater, Fl. 33766

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Food Delivery service

ARTICLE IV SHARES

The number of shares of stock is:

7500

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Kimberly A. Johns
2406 Hazelwood Lane
Clearwater, Fl. 33763

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Kimberly A. Johns
2406 Hazelwood Lane
Clearwater, Fl. 33763

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.

Kimberly A. Johns
Signature/Registered Agent

Kimberly A. Johns
Signature/Incorporator

2/29/00
Date

2/29/00
Date