

TRANSMITTAL LETTER

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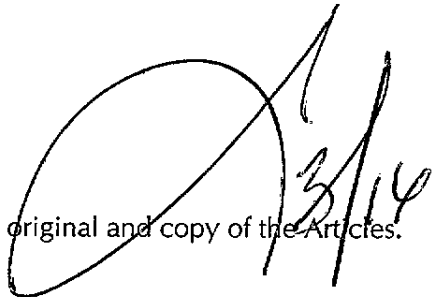
Secretary of State
Tallahassee, FL 32314

SUBJECT: Sun Toast, Inc.
(proposed corporate name)

Enclosed is an original and (1) copy of the articles of corporation and our check for: \$ 78.75

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-03/09/00-01034-007
*****78.75 *****78.75

FROM: Paul Kirk
Name(printed or type)
19462 Angel Ln
Address
Odessa, FL 33556
City, State, & Zip
813-928-8546
Telephone Number


3/14

Note: Please provide the original and copy of the Articles.

00 MAR -9 PM 1:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA
FILED

ARTICLES OF INCORPORATION

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:

Sun Toast, Inc..

ARTICLE II PRINCIPAL OFFICE

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

19462 Angel Ln
Odessa, FL 33556

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares with par value of \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

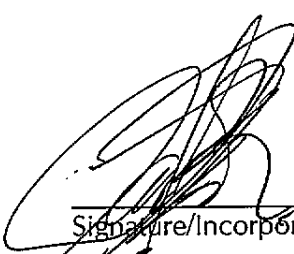
Michelle Roman
5008 W. Linebaugh Ave Ate 19
Tampa, FL 33624

ARTICLE V INCORPORATOR(S)

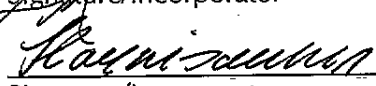
The name and street address of the incorporator to these Articles of Incorporation are:

Paul Kirk (500 Shares)
President
19462 Angel Ln
Odessa, Fl 33556

Jorens Karnisauskis (500 Shares)
Vice President
19462 Angel Ln
Odessa, FL 33556



Signature/Incorporator



Signature/Incorporator

3-6-00
Date

03.06.00
Date

FILED
00 MAR -9 PM 1:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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. 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.

[Handwritten Signature]

Signature/Register Agent

3-6-2010

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA