DOCOCCO 32708 TRANSMITTAL LETTER

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

TALLANDON STATE OF ST

	$ \langle \cdot \rangle$
SUBJECT:	\perp

Pegasus Vending Inc.
(Proposed corporate name - must include suffix

900003185459--0 -03/27/00--01113--006 *****78.75 *****78.75

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

\$70.00 \$131.25

Filing Fee & Certificate

\$Certified Copy & Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: Emmanue G. Kewalierakis

Name (Printed or typed)

3475 Keene Park Dr.

Address

Largo Florida 33771

City, State & Zip

Daytime Telephone number

S. Thompson MAR 3 1 2000

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



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:

Pegasus Vending Inc.

ARTICLE II PRINCIPAL OFFICE

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

3475 Keene Park Dr. Largo, Florida 33771

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

100,000

ARTICLE IV	INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Flori	da street address of the initial registered agent are:
Emmanu	el B. Kavallierakas
3475 Keen	e Park Dr.
ARTICLE	e fark Dr. INCORPORATOR
	ress of the incorporator to these Articles of Incorporation are:
Emmanue	1 B. Kavallierakas
2475 Vac	

eene park Dr.

Signature/Incorporator

(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. 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/

Signature/Registered Agent

Date