4 - CAPITAL CONNECTION, INC.

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

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			Art of Inc. File Cent.
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			Foreign Corp. File
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			Trade/Service Mark
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			Annual Report / Reinstatement 2 = □
			Cert. Copy ST. C.
	•		Photo Copy
		,	Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
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			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search = 7
			Driving Record SCO & CO
Requested by:	LM 4/13	9:19	UCC 1 or 3 File 520
Name	Date	Time	UCC 11 Search
			UCC 11 Retrieval
Walk-In	_ Will Pick U	p	Courier Courier

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:

Italian Dream, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Daytona Beach Mall 104 N. Nova Road Daytona Beach, FL 32114

ARTICLE III SHARES

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

1000 .

ARTICLE IV	INITIAL REGIST	TERED AGENT AN	ID STREET ADDRESS
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The name and Florida street address of the initial registered agent are:

Attilio Miglietta 2711 N. Halifax Ave., #458 Daytona Beach, FL 32118-3100

ARTICLE V INCORPORATOR

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

Attilio Miglietta 2711 N. Halifax Ave., #458 Daytona Beach, FL 32118-3100

Signature/Incorporator

*D*ate

(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. Thereby 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