D0000065724

OO JUL -6 AM 8: 06
SECRETARY OF STATE

## TRANSMITTAL LETTER

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

SUBJECT:	LINDA L	ou's	HOME COOK	ing INC.	,					
_	(	(Proposed corporate name - must include suffix)								
			80	000033153 97705706-571 ******70.00 *	58-002 93-002 *****70.00					
Enclosed is an ori	iginal and one(1) copy	y of the article	s of incorporation and a	check for:						
\$70.00 Filing Fee	\$78.75		U\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fée, Certified Copy & Certificate of Status						
FROI	M: LIND	A Lou	c Clemins							
		Name (Printed or typed)								
	443	4432 AlligATOR DRIVE								
Address										
	VENIC	E 7	-la 342	.93	,					
		City, S	State & Zip		.v '					
	94	941 - 408 - 1808								
Daytime Telephone number										

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

## 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.

Business Corporali	on Aci, nereox auc	pps me jonowing	Articles of incorpor	tatori.	Secon 6	A A
ARTICLE I	NAME				TALLAHASSEE. FL	<sup>M</sup> 8:06
The name of the	ornoration shall	be:	±.		103EE. F	STATE
,	1 ,	, /		TALA		·URIDA
LINDA	Lou's	HomE	Cooking	4./VC,		·
ARTICLE II	PRINCIPAL	OFFICE	± <u>, , , , , , , , , , , , , , , , , , ,</u>			· ÷ .
			s of this corporation	on shall be:		•
3974	S. TAMI	ami TR	AIL			
VENICE	-, Fla.	3429	3			
	SHARES					
The number of sh	ares of stock that	this corporation	n is authorized to h	ave outstanding a	it any one time is:	•
		*		_	·	
1000						
Abrict is m	INITIAL D	<del>É</del> CISTEPEN	AGENT AND	STREET ADD	RESS	
The name and Flo	rida street addre	ss of the initial r	egistered agent are	:		· -
/_/NID	A Low	Clemin	15			
	2 Allig					
115.	1100	7700 242	93			
ARTICLE V	INCORPOR	ATOR	. , _			
The name and ac	Idress of the inc	orporator to thes	e Articles of Incor	poration are:		
LIA	IDA LOU	Clemin-	2			
44	32 Allig	PATOR DR.	102			
Ú	ENICE , F	12 3429	73			

(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

de Jon Clemens

7-5-00

Signature/Registered Agent

Signature/Incorporator

Date