

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

00 JUL 12 TH 1: 36
SECRETARISE FRANCE
TALLAHASSE SECRETARION

SUBJECT: CESAR JR. #1, INC.

(Proposed corporate name - must include suffix)

200003321142--4 -07/12/00--01061--004 ****236.25 *****78.75

inclosed is an original and \$70.00 Filing Fee	d one(1) copy of the articl \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	100 JUL 1
			HASSEE.	$\overline{\sim}$
FROM:	Robert Lyons Name (P	rinted or typed)	PORATI PORATI	PH 1: 2
	9403 N.Armenia Ave	•	ONS ONS	82
	Address			
	Tampa,Florida 33612			
	City, State & Zip		-	
. 3	1-813-453-1956			

Daytime Telephone number

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NOTE: Please provide the original and one copy of the articles in 10 1 2 2000

RTICLES 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.

<u>ARTICLE I</u>

The name of the corporation shall be:

CESAR JR.#1, Inc.

PRINCIPAL OFFICE ARTICLE II

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

9403 N.Armenia Ave. Tampa, Florida 39912

SHARES ARTICLE III

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

50 shares of common stock @ \$10.00 per share

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are

Robert Lyons 9403 N.Armenie Ave. Tampa, Florida 33612

INCORPORATOR

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

Cesar A, Rodriguez Jr. 1515 S. Grady Ave. Tampa, Florida 33629

Signature/incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to occupt 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