Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 2314	0000	0835	25
P.o.	Ven lime	Die Compan	14 Fnc

400003377044--3 -08/30/00--01027--015 ******78.75 ******78.75

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

TALLAR OF STATE OF S

KEY LIME PIE COMPANY
(Name of Corporation)

F. CHESSER SEP 5 2000

MAILING ADDRESS OF CORPORATION

LEY LIME PIE COMPANY

BOX 2086

NUMBER 33045

ACT VEST PHONE

(305) 295-0989

Area Code Number Ext.

ARTICLES OF INCORPORATION

of

Key Lime Pie Company

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME The name of the corporation is: Lime PiE ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. ARTICLE IV - CAPITAL STOCK ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is: STREET ADDRESS TRUMAN AVE 500 **FLORIDA** CITY Mailing address, if different STREET ADDRESS Box 2086 ZIP **FLORIDA** ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT The street address of the initial registered office and the name of the initial registered agent at the office is: NAME MACDERMOTT **ADDRESS**

33045

ZIP

CITY

FLORIDA

ARTICLE VII - INITI	AL BOARD OF DIRECTORS	
This corporation shall have(3 directors initially. The nu	imber of directors may be
either increased or diminished from time to time by the By-	Laws, but shall never be less than on-	e (1). The names and
addresses of the initial director(s) of the corporation are as f	oliows.	
NAME VATUETE VEIN	·	
NATIFILEEN NEITY		
ADDRESS 19141 ROCKY ROAD	CTACE 5	7IP 77 mui 7
CITY SIGARLOAE KEY	STATE FL	ZIP 33042
NAME SHERRI BOA		1 1
ADDRESS 1321 GEORGE ST		
CITY KEY WEST	STATE FC	ZIP 33040
NAME JAY MACDERMOTT		·
ADDRESS BOX Zo 86		·
	STATE FL	ZIP 33045
They are si		
	I - INCORPORATORS	
The names and addresses of the incorporators signing these	Articles of Incorporation are as follo	ows:
NAME KATHLEEN KElley		
ADDRESS 19141 ROCKY ROAD		1.22.1
	STATE FL	ZIP 33042
30642204	, , ,	<u> </u>
NAME SHERRI BOA		1, 75
ADDRESS 1321 GEORGE ST	·	an 7 5
CITY KEY WEST	STATE FL	ZIP 33040
NAME JAY WAS DERMOTE		
ADDRESS BOX 2086		
CITY KEY LIEST	STATE FL	ZIP 33045
The undersigned incorporator(s) have executed these	Articles of Incorporation this	20m
\wedge	2000	
day of HUGUST	31 . ()	
	Dhoori Boo	(m)
	THE TOOK	(Signature)
	Van Il Main	(0)
	for 1. juil	(Signature)
/	\sim \sim \sim \sim \sim	(a:
	/ bun MI agris n	(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

KEY	Lime	PiE	COMPANY
			(name of corporation)
			,

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

as indicated in the Articles of Incorporation		
at 500 TRUMAN AUE #7		2
KEY WEST FL 33040		_
has named JAY Mac DERMOTI	ZSE	UU
located at the aforesaid address, as its registered agent to accept service of process w	ith is this	AUG
state.	ASSE TARY	30
	H 유	
	50	=

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.

