

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P O BOX 6327 TALLAHASSEE, FL 32314

SUBJECT: PIZZA MAGIC OF PENSACOLA INC.

ENCLOSED IS AN ORIGINAL AND ONE (1) COPY OF THE ARTICLES OF

INCORPORATION AND OUR CHECK FOR 122.50

FROM:

SUSAN L MITCHELL

4801 KITTYHAWK CIRCLE

GULB BREEZE, FL 32561

1-850-469-6686

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SECRETARY OF STATE
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12-15

ARTICLE OF INCORPORATION

OF

PIZZA MAGIC OF PENSACOLA INC

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:
PIZZA MAGIC OF PENSACOLA INC

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

789 N NAVY BLVD

PENSACOLA, FL 32507

ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS
AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:
FIVE HUNDRED (500) SHARES

ARTICLE IV REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

SUSAN L MITCHELL

4801 KITTYHAWK CIRCLE

GULF BREEZE, FL 32561

ODDEC | PARTY ST. ST.

ARTICLE V INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

SUSAN L MITCHELL PRES/ SECRETARY

Gulf Breeze, Fl. 32561

GULF BREEZE, FL 32561

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 30th DAY OF NOVEMBER, 2000.

SUSAN L MITCHELL



CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

- 1. THE NAME OF THE CORPORATION IS PIZZA MAGIC OF PENSACOLA INC
- 2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS

SUSAN L MITCHELL

4180 KITTYHAWK CIRCLE

GULF BREEZE, FL 32561

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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SUSAN I MITCHELI

DATE 12-06-00