

TRANSMITTAL LETTER

P010000002760

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

600003522336--5  
-01/04/01--01004--016  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: C B Q GRILL INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

ADDITIONAL COPY REQUIRED

FROM: Gregory T. Wrobel  
                    Name (Printed or typed)

4563 Bee Ridge Road  
                    Address

Sarasota FL. 34233  
                    City, State & Zip

941 377-8881  
                    Daytime Telephone number

FILED  
01 JAN -3 AM 8:47  
TALLAHASSEE, FLORIDA

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

9-01

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

C B Q Grill Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4563 Bee Ridge Road  
Sarasota, FL 34233

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Food Service

## ARTICLE IV SHARES

The number of shares of stock is:

(1000) One Thousand

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Gregory T. Wrobel  
4563 Bee Ridge Road  
Sarasota, FL 34233

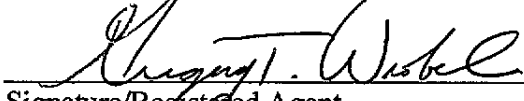
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gregory T. wrobel  
4563 Bee Ridge Road  
Sarasota FL 34233

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

1-1-2004  
Date

  
\_\_\_\_\_  
Signature/Incorporator

1-1-2001  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA