

P010000021244

TRANSMITTAL LETTER

FILED

01 FEB 26 AM 9:15

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: TRAVIS BISTRO, INC.
(Proposed corporate name - must include suffix)

700003768947--1
-02/26/01--01162--008
*****70.00 *****70.00

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

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Gail Adams
Name (Printed or typed)
1052 Trafalgar Dr.
Address
New Port Richey , FL 34655
City, State & Zip
(727) 712-9101
Daytime Telephone number

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

CP2-27

ARTICLES OF INCORPORATION

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01 FEB 26 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

TRAVIS BISTRO, INC.

ARTICLE II PRINCIPAL OFFICE

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

TRAVIS BISTRO, INC.
28350 U.S HWY. 19 N.
Clearwater, FL 33761

ARTICLE III SHARES

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

One Thousand Shares of Common Stock With A Par Value
of One Dollar Per Share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Gail Adams

1052 Trafalgar Dr.

New Port Richey, FL 34655

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Gail Adams

1052 Trafalgar Dr.

New Port Richey, FL 34655

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20th day of February, 2001.

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


Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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

1. The name of the corporation is TRAVIS BISTRO, INC.

2. The name and address of the registered agent and office is:

Gail Adams

(NAME)

1052 Trafalgar Dr.

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

New Port Richey, FL 34655

(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


(SIGNATURE)

2/20/01
(DATE)