

## Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

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Account Number : 104657003604 Phone : (352)787-1241 Fax Number : (352)753-0496 SECRETARY OF SPANORS OF DIVISION OF CORPORATIONS

# FLORIDA PROFIT CORPORATION OR P.A.

Bare Bones Fish & Steakhouse, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

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# SECRETARY OF STATE STATE STATE OF CORPORATIONS OF CORPORATIONS OF CORPORATIONS

# ARTICLES OF INCORPORATION OF BARE BONES FISH & STEAKHOUSE, INC.

The undersigned, acting as incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation:

#### ARTICLE I. NAME

The name of this corporation is BARE BONES FISH & STEAKHOUSE, INC.

#### ARTICLE II. PRINCIPAL OFFICE OR MAILING ADDRESS OF CORPORATION

The street address of the Corporation's principal office and mailing address of this corporation is: 3409 Gulf Winds Circle, Hernando Beach, Florida 34607.

#### ARTICLE III. CAPITAL STOCK

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

Five thousand (5,000) shares of common stock all of one class, having a nominal or par value of ONE CENT (\$.01) per share.

#### ARTICLE IV. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered agent of this corporation is 3409 Gulf Winds Circle, Hernando Beach, Florida 34607. The name of the initial registered agent of this corporation at that address is Thomas A. McEachern, III.

#### ARTICLE V. INCORPORATOR

The name and address of the Incorporator is Thomas A. McEachern, III, 3409 Gulf Winds Circle, Hernando Beach, Florida 34607.

#### ARTICLE VI. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this

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reservation.

#### ARTICLE VII. INDEMNIFICATION

The Corporation shall indemnify its officers and directors to the fullest extent permitted by the Florida Business Corporation Act.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation Thomas A. McEachern. Incorporator ACCEPTANCE BY REGISTERED AGENT: I AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID CORPORATION. STATE OF FLORIDA COUNTY OF LAKE The foregoing instrument was acknowledged before me this It day of MARCH , 2001, by Thomas A. McEachern, III, Incorporator, who did not take an oath. MEDICALLY SAME SEAL]'/ Transition NOTARY PUBLIC-STATE OF FLORIDA Worker 1915 over their No Colorado (Signature of Notary) Mituree Arthus Hilling till. MARGARET A. KOLWICZ (Typed name of Notary) (Commission Number) Personally known\_ Type of Identification Produced Identification \_ Produced:

DIVISION OF CORPORATIONS

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