

PO1000078353

MICHAEL ANGUELO
2800 PONCE DELEON
CORAL GABLES, FL 33134

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

FILED
01 AUG - 6 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: CONGA CAFE, INC

Enclosed is a check for \$ 78.75 together with two copies of the articles of incorporation
of CONGA CAFE, INC

Please return a certified copy to the registered agent of the corporation:

MICHAEL ANGUELO
2800 PONCE DELEON
CORAL GABLES, FL 33134

Thank you for your attention to this request.

Sincerely,



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*****78.75 *****78.75

B. BROWN AUG - 9 2001 ✓

ARTICLES OF INCORPORATION

OF

CONGA CAFE, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporators, for the purpose of forming a corporation under the Florida Corporation Act, Hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CONGA CAFE, INC.

ARTICLE II PRINCIPAL OFFICE

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

2800 PONCE DELEON
CORAL GABLES, FL 33134

ARTICLE III CAPITAL STOCK

The number of Shares of Stock that this corporation is authorized to issue and have outstanding at any one time is:

10,000 (Ten Thousand)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent and the initial office of the corporation is:

MICHAEL ANGUELO
2800 PONCE DELEON
CORAL GABLES, FL 33134

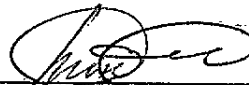
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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATORS

The name and street address of the incorporators to these Articles of Incorporation are:

MICHAEL ANGUELO
2800 PONCE DELEON
CORAL GABLES, FL 33134

The undersigned have executed these Articles of Incorporation this 2 Day of
August, 2001



Signature

Signature

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION 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 OF REGISTERED AGENT



Signature

8/2/01

Date