

P010000 83225

August 20, 2001

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

600004547986--6  
-08/22/01--01016--006  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**SUBJECT: ZATS BEEFS II INC.**

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$70.00 representing the Filing Fee.

**From:**

JAMES E. MARCI  
108 COMMERCIAL WAY  
SPRING HILL, FL 34606

FILED  
01 AUG 21 AM 7:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REGISTRATION AUG 23 2001

**ARTICLES OF INCORPORATION  
OF  
ZATS BEEFS II INC.**

*The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

**ARTICLE I NAME**

The name of the corporation shall be:  
ZATS BEEFS II INC.

**ARTICLE II PRINCIPAL OFFICE**

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

108 COMMERCIAL WAY  
SPRING HILL, FL 34606

**ARTICLE III SHARES**

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

1000 SHARES OF COMMON STOCK, EACH SHARE HAVING A  
PAR VALUE OF ONE DOLLAR (\$1.00)

**ARTICLE IV INITIAL REGISTERED AGENT**

The name and Florida street address of the initial registered agent are:

JAMES E. MARCI  
108 COMMERCIAL WAY  
SPRING HILL, FL 34606

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

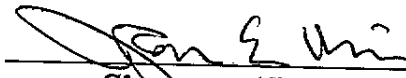
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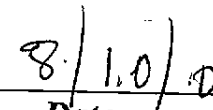
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**ARTICLE V INCORPORATOR**

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

JAMES E. MARCI  
108 COMMERCIAL WAY  
SPRING HILL, FL 34606

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

  
\_\_\_\_\_  
*Date*

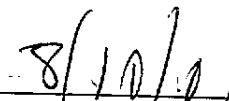
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TALLAHASSEE, FLORIDA

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*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/ Registered Agent*

  
\_\_\_\_\_  
*Date*