

P01000009S597
Freda L. Jones

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TRANSMITTAL LETTER

October 4, 2001

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

100004628191--0
-10/09/01--01019--016
*****70.00 *****70.00

SUBJECT:

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

Please return the photocopy to me with the filing date stamped on it.

FROM:

Horsin Around Deli, Inc.
Freda L. Jones
19350 Meredith Road
N Fort Myers, FL 33917

FILED
01 OCT -9 PM 12:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

D. WHITE OCT 10 2001
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Articles of Incorporation

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator submits these articles of Incorporation for the purpose of forming a for-profit corporation.

1. The name of the corporation shall be:

Horsin Around Deli, Inc.

2. The principal place of business and mailing address of this corporation is:

10440 Bayshore Road, Unit 1, N. Fort Myers, FL 33917

3. The corporation shall have the authority to issue 50,000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

4. The name and address of the corporation's registered agent is:

Freda L. Jones

10440 Bayshore Road, Unit 1 N. Fort Myers, FL 33917

5. The initial Board of Directors shall have 1 member whose name and address are as follows:

Freda L. Jones

10440 Bayshore Road, Unit 1 N. Fort Myers, FL 33917

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The name and address of the incorporator of this corporation is:

Freda L. Jones

10440 Bayshore Road, Unit 1 N. Fort Myers, FL 33917

Dated 10/01/01

Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 10/01/01

Registered Agent

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01 OCT -9 PM 12:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA