CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

	P010000995a	14
n Gree	ex Village Restaurant & Deli, Dac	

OI OCT 12 PM 2:38

SECRETARY UF STATE
TALLAHASSEE, FLORIDA

400004634734--6 -10/12/01--01047--004 *****78.75 ******78.75

n n-	
	•
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend. File
- a a a a a a a a a a a a a a a a a a a	RA Resignation
· ·	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
-	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search J. BRYAN OCT 1 2 2001
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Greek VIII Age Restaurant & Deliging.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11125 PARK Blud. # 117 Seminole, Fl. 33772

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any Lawful Activity in the State of Florida.

<u>ARTICLE IV SHARES</u>

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

VASILIA KYRIAZIS
7713 Justin Ct.
5t. Petersburg, Fl. 33709

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Charles GENTY 1640 St. Paus Dr. Clearwater, Fl. 33764

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charles GENTY 1640 St. Pauls Dr. Clearwaters Fl. 33764

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

O-8-0/
Date

| O-8-0/
| Date

| O-8-0/
| Date

Oloci 12 Phr. Solvich