

**P01000110638**  
**TRANSMITTAL LETTER**

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

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: LE Gala Restaurant II Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200004593492--2

-09/17/01--01062--004

\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Deva LAUSCAR  
Name (Printed or typed)

6436 Lauren Ct.  
Address

Orlando FL 32818  
City, State & Zip

407 839 5888  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

G. BLALOCK NOV 19 2001

1001 23581



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

September 19, 2001

DEVA LAUSCAR  
6436 LAUREN CT.  
ORLANDO, FL 32818

SUBJECT: LE GALA RESTAURANT II INC.  
Ref. Number: W01000021771

We have received your document for LE GALA RESTAURANT II INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock  
Document Specialist  
New Filing Section

Letter Number: 701A00052516

# 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:

LE Galo Restaurant II Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

307 N. Orange Blossom Trail  
Orlando FL 32805

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Deva Lauscar 6436 Lauren Ct. Orlando FL 32818  
Daddy F. Lauscar 6436 Lauren Ct. Orlando FL 32818  
Elou Fleurine 152 N.W. 17th St. Homestead FL 33030

## ARTICLE VI REGISTERED AGENT

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

Deva Lauscar  
6436 Lauren Ct.  
Orlando FL 32818

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Daddy F. Lauscar  
6436 Lauren Ct.  
Orlando FL 32818

\*\*\*\*\*  
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

Deva Lauscar  
Signature/Registered Agent

10-9-01  
Date

Daddy F. Lauscar  
Signature/Incorporator

10-9-01  
Date