

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:	THE PART NAME OF THE PROPERTY.

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT CORPORATION OR P.A.

big poppa's fish fry, inc.

Certificate of Status	0
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H 0200003365 ARTICLES OF INCORPORATION

<u>ARTICLE 1</u>

The name of the corporation is:

BIG POPPA'S FISH FRY, INC.

ARTICLE 11

NATURE OF CORPORATE BUSINESS

The corporation may engage in or transact any or all activity or business permitted under the laws of the United States of America and the State of Florida.

ARTICLE 111

PLACE OF BUSINESS

The principal place of business and mailing address of the corporation is:

4042 Pembroke Rd., Hollywood Fl. 33023

ARTICLE 1V

CAPITAL STOCK

The Corporation shall have the authority to issue 100,000 shares of common stock, in one class only, each with a par value of \$1.00.

The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

<u>ARTICLE V</u>

INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The registered agent of the corporation is Fritz Grant and the registered address is 4200 NW 16TH ST SUITE 608, LAUDERHILL FI 33313.

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INITIAL BOARD OD DIRECTORS AND INITIAL DIRECTORS

The number of directors constituting the Initial Board of Directors are as follows:

Shonte Butler, 6156 SW 23 th St., Miramar, FL 33023.

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.

ARTICLE VII

INCORPORATOR

The incorporator of this corporation are Shonte Butler whose address is 6156 SW 23 rd St, Miramar, Fl 33023.

Date	
Incorporator Shorte Butter	
Incorporator Short Bidler	_

Having been named as registered agent and to accept service of progress 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 provision of all statues relating to proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Date	
Registered Agent 74 Sout	

SECRETARY OF STATE
ALLAHASSEL, FLORIDA

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