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TRANSMITTAL LETTER

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

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-08/07/02--01040--001
*****87.50 *****87.50

SUBJECT:

JAMAICA PATTY HUT INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:

TREVOR BAILEY

Name (Printed or typed)

4940 OLD WINTER GARDEN RD,

Address

ORLANDO, FL 32811

City, State & Zip

407 447-0173

Daytime Telephone number

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

D. WHITE AUG - 8 2002

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and /or 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Jamaica Patty Hut Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business /mailing address is:

11615 Sir Winston Way
Orlando, FL 32824

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engaged in any type of legal business activity

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Altia Lacy - Presisent
11615 Sir Winston Way
Orlando, FL 32824

Altia Lacy - Treasurer
11615 Sir Winston Way
Orlando, FL 32824

Ena Brown - Secretary
11615 Sir Winston Way
Orlando, FL 32824

ARTICLE VI REGISTERED AGENT

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

Trevor Bailey 4940 Old Winter Garden Road, Suite B
Orlando, FL 32811

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Altia Lacy
11615 Sir Winston Way
Ocoee, FL 32824

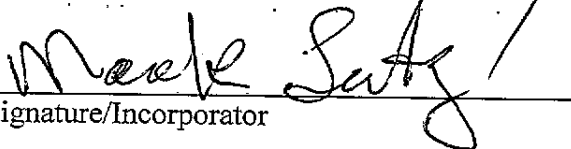
Ena Brown
11615 Sir Winston Way
Orlando, FL 32824

Mark Lutz
915 Wilson Ridge Dr
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


Signature/Registered Agent


Date


Signature/Incorporator


Date

FILED

02 AUG -7 AM 10: 24

SECRETARY OF STATE
TALLAHASSEE FLORIDA