

CAPITAL CONNECTION, INC.

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

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Pickle Barrell, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☒ 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
- ☐ 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
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

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DIVISION OF CORPORATION

Signature

Requested by:

Name SK Date 9/18/02 Time 10:35

Walk-In Will Pick Up

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ARTICLES OF INCORPORATION

OF

PICKLE BARREL, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation shall be:

PICKLE BARREL, INC.

The principal place of business of this corporation shall be:

**9520 Seminole Boulevard
Seminole, Florida 33772**

The mailing address of this corporation shall be:

**9520 Seminole Boulevard
Seminole, Florida 33772**

ARTICLE II. NATURE OF BUSINESS

This corporation may engage in or transact any or all-lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock have \$1.00 per value per share.

ARTICLE IV. TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V. OFFICERS DIRECTORS

This corporation is to have two directors and two officers, initially. The names and street addresses of the initial directors and officers who shall hold office for the first year of the corporation's existence, or until their successors are elected or appointed are:

***Frank Druzas
President***

***104 S. Mercury Ave
Clearwater, Florida 33765***

***Elias Kardassis
Vice President***

***1379 S. Hercules Ave
Clearwater, Florida 33764***

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to the Articles of Incorporation is:

***Frank Druzas
President***

***104 S. Mercury Ave
Clearwater, Florida 33765***

IN WITNESS WHEREOF, the under signed incorporator has executed these Articles of Incorporation this 10 day of SEPTEMBER, 2002.

Signature of Incorporator

[Signature]
Incorporator

STATE OF FLORIDA
COUNTY OF PINELLAS

THE FOREGOING instrument was acknowledge and sworn to before me this 10 day of SEPTEMBER, 2002, by Frank Druzas of Pickle Barrel, Inc.

He/She is personally known to me or has produced a driver's license as identification and did not take an oath.

 Personally Known to me, or

X Produced Identification: FL DRIVERS LIC D 622-267-59-052-D

Notary Public

[Signature]



Dori A. Lindsley
Commission # CG 821541
Expires Apr. 15, 2003
Bonded Thru
Atlantic Bonding Co., Inc.

CERTIFICATE DESIGNATING

REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida .

1. The name of the corporation is:

Pickle Barrel, Inc.

2. The name and address of the registered agent and office is:

Name: Frank Druzas

Address: 104 Mercury Avenue South

City: Clearwater, **State:** FL **Zip Code:** 33765

SIGNATURE: _____

TITLE: PRESIDENT

DATE: 9/16/02

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE: _____

DATE: 9/16/02