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(Requestor	s Name)	
(Address)		
(Address)		
(City/State/J	Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business E	Entity Name)	
(Document	Number)	
Certified Copies C	ertificates of Status	
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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT:	NEIGHBORHOOD PASTA COM			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee	□ \$78.75 Filing Fee	\$87.50 Filing Fee,	
rining ree	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
		ADDITIONAL CO	Status PPY REQUIRED	
FROM:	FROM: James D. Asher, Attorney Name (Printed or typed)			
	203 Suite B Main Stree			
	Address			
	Whitesburg, KY 41858	State & Zip		
	City,	, State & Zip		
	606-633-1616 Daytime 7	Telephone number		

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

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:

Neighborhood Pasta Company

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4636 Southwinds III Drive Destin, FL 32541

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any and all lawful business as allowed under the laws of the State of Florida, and, more specifically, to own, lease or sublease and or manage restaurants, and food establishments.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Theresa Johnson 4636 Southwinds III Drive Destin, FL 32541 President/Secretary/Director Marty Johnson 4636 Southwinds III Drive Destin, FL 32541 Vice President/Treasurer/Director

ARTICLE VI REGISTERED AGENT

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

Theresa Johnson 4636 Southwinds III Drive Destin, FL 32541

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James D. Asher Attorney at Law 203 Suite B Main Street Whitesburg, KY 41858

Having been figmed 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

ignature/Incorporator

/ Datq

Date