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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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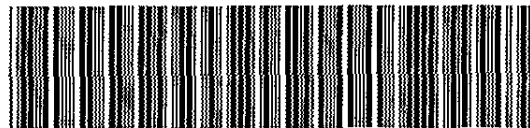
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
CLARK COUNTY, NV

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TRANSMITTAL LETTER

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

SUBJECT: MALSORI'S RESTAURANT, 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: Albert Vogli
Name (Printed or typed)

523 Clematis Street
Address

West Palm Beach, FL 33401
City, State & Zip

561/ 835-8522
Daytime 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:

malsoni's Restaurant, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

523 Clematis Street
West Palm Beach, FL 33401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to transact any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares of common stock having an individual
par value of \$1.00

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Albert Vogli P/D 523 Clematis St.
West Palm Beach, FL 33401
Flamur Vogli VP/D 523 Clematis St.
West Palm Beach, FL 33401

ARTICLE VI REGISTERED AGENT

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

Albert Vogli
523 Clematis Street
West Palm Beach, FL 33401

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Albert Vogli
523 Clematis Street
West Palm Beach, FL 33401

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

02 05 03

Signature/Incorporator

Date

02 05 03

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03 FEB 10 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA