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(Requestor's Name)

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(City/State/Zip/Phone #)

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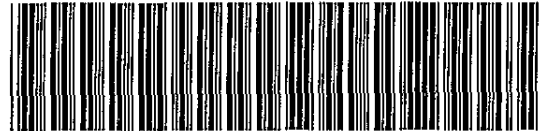
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 MAR 24 PM 12:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/1

**Peter Makris  
2110 Drew Street  
Clearwater, Florida 33765**

3/21/03

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

**Gentlemen:**

**I am enclosing the Articles of Incorporation and the Certificate Designating Registered Agent / Registered Office. Also enclosed are the applicable fees for the Department of State. Please file the Articles of Incorporation as soon as possible and return the articles back to the address below:**

**Peter Makris  
2110 Drew Street  
Clearwater, FL 33765**

**If there are any questions, or you are having problems filing the Articles, please call me at (727) 446-0000.**

**Very Truly Yours,**

*Peter Makris CPA*

**Peter Makris**

**ARTICLES OF INCORPORATION**

**OF**

**Spring Garden Family Restaurant, Inc.**

***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:***

**Spring Garden Family Restaurant, Inc.**

***The principal place of business of this corporation shall be:***

**1018 62<sup>nd</sup> Avenue North  
St. Petersburg, Florida 33702**

***The mailing address of this corporation shall be:***

**1018 62<sup>nd</sup> Avenue North  
St. Petersburg, Florida 33702**

**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.***

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TALLAHASSEE, FLORIDA

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### **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 three directors and three 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:*

*Paul Karkoulas  
President*

*1888 Eagle Trace Blvd  
Palm Harbor, Florida 34685*

*Mary Karkoulas  
Vice President*

*1888 Eagle Trace Blvd  
Palm Harbor, Florida 34685*

*Peter Karkoulas  
Secretary*

*1888 Eagle Trace Blvd  
Palm Harbor, Florida 34685*

### **ARTICLE VI. INCORPORATOR**

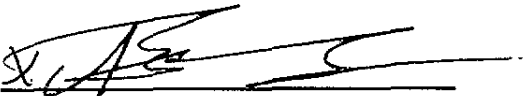
*The name and street address of the incorporator to the Articles of Incorporation is:*

*Paul Karkoulas  
President*

*1888 Eagle Trace Blvd  
Palm Harbor, Florida 34685*

IN WITNESS WHEREOF, the under signed incorporator has executed these Articles of Incorporation this 21 day of MARCH, 2003.

Signature of Incorporator

  
Incorporator

STATE OF FLORIDA  
COUNTY OF PINELLAS

THE FOREGOING instrument was acknowledge and sworn to before me this 21 day of MARCH, 2003, by Paul Karkoulas of Spring Garden Family Restaurant, 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 DRIVER LIC # K624-680-39-247-0

Notary Public



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:

Spring Garden Family Restaurant, Inc.

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

**Name:** Paul Karkoulas

**Address:** 1018 62<sup>nd</sup> Avenue North

**City:** St. Petersburg, **State:** FL **Zip Code:** 33702

SIGNATURE: \_\_\_\_\_

TITLE: President

DATE: \_\_\_\_\_

3/21/03

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: \_\_\_\_\_

3/21/03

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TALLAHASSEE, FLORIDA