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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 224-7047

FLORIDA PROFIT CORPORATION OR P.A.

Gary's Flamin' Grill, Inc.

Certificate of Status	0
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ARTICLES OF INCORPORATION
OF

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Gary's Flamin' Grill, Inc.

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

ARTICLE I: NAME

The name of the corporation is Gary's Flamin' Grill, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 1377 Brickyard Road, Suite 3, Chipley, Florida 32428.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is five-hundred (500) shares having no par value.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Kristi M. Odom, 1314 Jackson Avenue, Chipley, Florida 32428.

ARTICLE V: INCORPORATOR

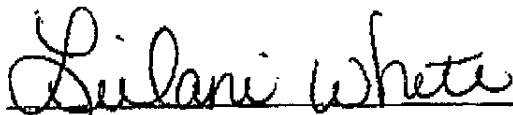
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Director of the corporation is Gary Abbott, 1846 Rosewood Drive, Chipley, Florida 32428.

The undersigned has executed these Articles of Incorporation this 20th day of June 2003.

"Capital Connection, Inc. by Leilani White, Client Representative"

A handwritten signature in cursive script, reading "Leilani White", is written over a horizontal line.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for Gary's Flamin' Grill, Inc., at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Signature:

Kristi M. Odom
KRISTI M. ODOM
1314 JACKSON AVENUE
CHIPLEY, FLORIDA 32428

Date:

6/19/03

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