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Certified Copies	_ Certificates	of Status	
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TRANSMITTAL LETTER

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

SUBJECT:	PEAR LINE'	In c offor TENAME-MUSTINGLE	MES.	
	✓ (PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles 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	
	Co comments of Santas	ADDITIONAL CO	& Certificate of Status	
FROM:	TVDE THOM	(Printed or typed)		
1223 NW 125 TEPLACE				
SINRIVE, Fl. 33323 City, State & Zip				
	904-830- Daytime	Folephone number		

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 9, 2003

JUDE THOMAS 1223 NW 125 TERRACE SUNRISE, FL 33323

SUBJECT: PEARLINE'S, INC. Ref. Number: W03000025668

We have received your document for PEARLINE'S, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please complete Article(s) V, VI & VII.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filings Section

Letter Number: 603A00050026

O3 SEP 23 MM 8: 49

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: Pearline's Incorporated

ARTICLE II PRINCIPAL OFFICE

The Principal place of business/mailing address is: 1223 NW 125 Terrace
Sunrise, Fl 33323

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide food services to the general public

ARICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Jude Thomas Chief Financial Officer 1223 NW 125 Terrace Sunrise, Fl 33323

ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent is: Vida Shorte Thomas 1223 NW 125 Terrace Sunrise, Fl 33323

ARTICLE VII INCORPORATOR

The name and address of the incorporator is: Jude Thomas 1223 NW 125 terrace Sunrise, FI 33323

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

Signature/Incorporator

Date

Date