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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE FALLAHASSEE, FLORING.

150/28/04



HOLCHER AND AFFILIATED COMPANIES

April 22, 2004

Florida Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Carlitos Desserts of Naples, Inc.

To Whom it May Concern:

Enclosed herewith please find the Articles of Incorporation for Carlitos Desserts of Naples, Inc., along with check no. 2376 in the amount of \$78.75 representing filing fees for same.

Thank you for your assistance in this matter. Should you have any questions, please feel free to contact me.

Cordially,

Sonya G. Heiser Firm Manager

/sgh enclosure

ARTICLES OF INCORPORATION FOR CARLITOS DESSERTS OF NAPLES, 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 of the corporation shall be:

CARLITOS DESSERTS OF NAPLES, INC.

ARTICLE II

Principal place of business and mailing address of the corporation:

1917 TRADE CIRCLE WAY SUITE 1 NAPLES, FLORIDA 34109

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares at \$1.00 par.

ARTICLE IV

Name and Florida street address of the initial registered agent:

Inez Eduvina Gandica 1917 Trade Circle Way Suite 1 Naples, Florida 34109

ARTICLE V

Name and address of the incorporator to these Articles of Incorporation:

Max A. Holcher 4210 3rd Ave. N.W. Naples, Florida 34109

ARTICLE VI

Effective date of this corporation is April 22, 2004.

Signature of Incorporator

Date: Que 21, 2004

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FILENAME \p Z:\ACTIVE CLIENTS\PEREZ\Carlitos Desserts\1 Articles of Incor..doc

ACCEPTANCE BY REGISTERERD AGENT

Having been named Registered Agent to accept service of process for the above-stated corporation 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 am familiar with and accept the obligations of my position as Registered Agent.

Signature/Registered Agent

Date: _______

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