P040000	94303
(Requestor's Name) (Address) (Address)	200037931202
(City/State/Zip/Phone #)	06/21/0401011001 **78.75
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	TALLAHASSEE
	EE.FLORIDA
Office Use Only	

## TRANSMITTAL LETTER

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

LLICE SUBJECT: Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$78.75 \$70.00 □\$122.50 **\$131.25** Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate **ADDITIONAL COPY REQUIRED** Shalom Cohen & Yuval Fadlon Name (Printed or typed) FROM: INS Address State & Zip Daytime Telephone number

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

## 5750 Milling 04 The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act. hereby adopts the following Articles of Incorporation. A 81 NUL 4005 ARTICLE I NAME The name of the corporation shall be: Lure Cafe, Inc. **ARTICLE II PRINCIPAL OFFICE** The principal place of business and mailing address of this corporation shall be: 6995 COLVIS AVC Ş Many Beach, FL 33141 ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: 6995 Collins ALC -Shalom Cohen Many Beach, FL 33141 ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: 6955 Collins Auc Manu Beach FL ARTICLE IF EFFECTIVE DATE Shalom Cohen's Kubar Foodion ARTICLE V INCORPORATOR

CLCIT EFFECTIVE DATE Sileanure/Incorporator

ARTICLES OF INCORPORATION

6/14/04 Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and 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 I am familiar with and accept the oblightions of my position as registered agent

CERTIFICATE OF DI	ESIGNATION OF
<b>REGISTERED AGENT/R</b>	EGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIG-NATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLCRIDA.

ue 1. The name of the corporation is:

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

.,\*

Shalom Cohen	Ă.	
(Name)	LECA	
_ 6995 Collins Ave	JUN 18 HETARY HASSE	Π
(P.O. Box not acceptable)	18 SEE,	F
Mianie Beach, FL 33141	A I	
(Citý/State/_ip)	B I Z	J

Having been named as registered agent and 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 I am familiar with and accept the obligations of my position as registered agent.

Signature

ι

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL