

PO4000125349

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(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
04 AUG 30 PM 2:05

m 8/31

## TRANSMITTAL LETTER

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

**SUBJECT:** PRIME TIME PIZZA OF JACKSONVILLE, INC.

**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

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

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** EUGENE MACK SR.

Name (Printed or typed)

6589 CEDRO CT. / 1605-4 N. MYRTLE AVENUE

Address

JACKSONVILLE, FL 32244/ JACKSONVILLE, FL 32209

City, State & Zip

(904) 356-0100/ (904) 778-3222

Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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**ARTICLE I NAME**

The name of the corporation shall be:

PRIME TIME PIZZA OF JACKSONVILLE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1605-4 N. MYRTLE AVENUE  
JACKSONVILLE, FLORIDA 32209

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
TO CONDUCT ANY AND ALL LAWFULL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000 SHARES OF \$0.01 PAR VALUE COMMON STOCK, WHICH SHALL BE DESIGNATED COMMON SHARES.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

EUGENE MACK SR. - DIRECTOR  
1605-4 N.MYRTLE AVENUE  
JACKSONVILLE, FLORIDA 32209

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

EUGENE MACK SR.  
1605-4 N. MYRTLE AVENUE  
JACKSONVILLE, FL 32209

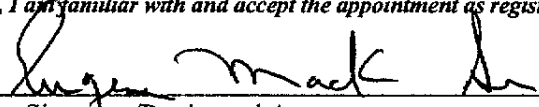
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

EUGENE MACK SR.  
6589 CEDRO CT.  
JACKSONVILLE, FL 32244

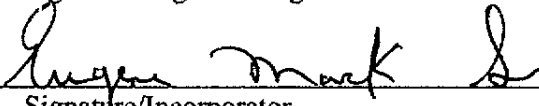
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

08-23-04

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

08-23-04

\_\_\_\_\_  
Date