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Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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TRANSMITTAL LETTER

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

SUBJECT:	VACLAV LV	 -	
	(PROPOSED CORPORA	TE NAME – MUSTUNCE	UDE SUFFIX)
Enclosed are an orig	ginal 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 ADDITIONAL CO	& Certificate of Status
FROM:		(Printed or typed)	
		Address	94
	239 542		

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)

ARTICLE I NAME

The name of the corporation shall be: VACLAV Inc

04 NOV 12 PH 3: 18

SECRETARY CSTATE TALL AHASSUT FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5990 Winkler Rd Ft Myers, FL 33919

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Restau Rant

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Pavid V. VesEly 5723 Flamingo Pe Cape Coral, FL 33904 President

ARTICLE VI REGISTERED AGENT

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

DAVID U. VESELY, 5990 Winkler Rd, Ft Myens, FL 33919

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PAUID V. VESELY 5713 Flamingo DR Cape Coral, Fl 33904

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

11-8-04 Date

Date

Signature/Incorporator

11 - 8 - 04 Date