

**P05000010370**

Florida Department of State  
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To: Division of Corporations  
 Fax Number : (850) 205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.  
 Account Number : 071001002335  
 Phone : (305) 599-0839  
 Fax Number : (305) 716-0346

2005 JAN 20 AM 9:23  
TALLAHASSEE FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**

**ISLAND BREEZE 52, INC.**

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION**

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**

The name of the corporation shall be: **Island Breeze 52, Inc.**

**ARTICLE II PRINCIPAL OFFICE/ADDRESS**

The mailing address of business of this corporation shall be:  
**404 Gross Avenue  
Tarpon Springs, FL 34689**

**ARTICLE III SHARES**

The number of shares of stock this corporation is authorized to have outstanding at any one time is:  
**One-Thousand (1,000) Shares  
Common Stock**

**ARTICLE IV INITIAL REGISTERED AGENT**

The name and Florida street address of the initial registered agent are:  
**Jasper Wallace  
404 Gross Avenue  
Tarpon Springs, FL 34689**

**ARTICLE V INCORPORATOR**

The name and mailing address of the incorporator to these Articles of Incorporation are:  
**Jasper Wallace  
404 Gross Avenue  
Tarpon Springs, FL 34689**

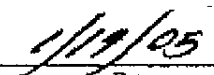
**ARTICLE VI OFFICERS**

The officers of the corporation are: **Jasper Wallace: President/Secretary/Treasurer**

**ARTICLE VII BUSINESS PURPOSE**

The business purpose of the corporation is: **Retail/Restaurant**

  
Signature/Incorporator

  
Date

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/Registered Agent

  
Date