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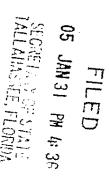
(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer: 1-31-65 Batch Work						

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TRANSMITTAL LETTER

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

SUBJECT: J. Chris	stopher's Tampa, Inc	· · · · · · · · · · · · · · · · · · ·		_
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l a check for:	
—	7 200 - 2			
\$70.00	2 \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
			Status	
		PY REQUIRED		
FROM: Wil	liam G. Kranich			
110341.	Name	(Printed or typed)		
	14366 N. Dale Mabry Hwy			_ =-
•		Address		
•	Tampa, FL 33618			
•	City	, State & Zip		
<u>.</u>	813-908-7023	<u> </u>		,
	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)

ARTICLE I NAME

The name of the corporation shall be:

J. Christopher's Tampa. Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 14366 N. Dale Mabry Hwy Tampa, FL 33618

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Restaurant

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

William Kranich 4213 Windtree Dr. Tampa, FL 33624 President

ARTICLE VI REGISTERED AGENT

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

William G. Kranich 4213 Windtree Dr. Tampa, FL 33624

ARTICLE VII	INCORPORA	TOR		_			
The <u>name</u> and add	Iress of the Incorp	orator is:					
William G. Kranich	4213 Windtree Dr.	Tampa, FL	33624				
**************************************	**************************************	********* accept service (************ of process for	********** the above state	************ d corporation	**************************************	****** gnated in thi
certificate, I am famili			s regisierea ag	geni ana agree i 	io aci in inis ca	1-70-0	5
	e/Registered Agen	70	>		,	Date ' ()	5
Signatur	re/Incorporator				·· — ·	Date	_

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