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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
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FLORIDA PROFIT CORPORATION OR P.A.

4Slices, Inc.

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

4Slices, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

4Slices, Inc.

**504 SW Sanctuary Drive
Port St. Lucie, FL 34986**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

4 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Rita Markowitz
504 SW Sanctuary Drive
Port St. Lucie, FL 34986**

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Danielle Visconte- 1412 SW Bent Pine Cove, Port St. Lucie, FL 34986 - President
Michael Visconte- 1412 SW Bent Pine Cove, Port St. Lucie, FL 34986 - Vice President
Ronnie Markowitz- 504 SW Sanctuary Drive, Port St. Lucie, FL 34986 - Treasurer
Rita Markowitz- 504 SW Sanctuary Drive, Port St. Lucie, FL 34986 - Secretary

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Danielle Visconte- 1412 SW Bent Pine Cove, Port St. Lucie, FL 34986
Michael Visconte- 1412 SW Bent Pine Cove, Port St. Lucie, FL 34986
Ronnie Markowitz- 504 SW Sanctuary Drive, Port St. Lucie, FL 34986
Rita Markowitz- 504 SW Sanctuary Drive, Port St. Lucie, FL 34986

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

26th day of May 2005.



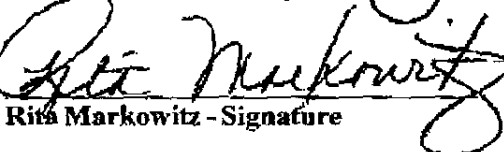
Danielle Visconte - Signature



Michael Visconte - Signature



Ronnie Markowitz - Signature



Rita Markowitz - Signature

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **4Slices, Inc.**

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

Rita Markowitz

Name

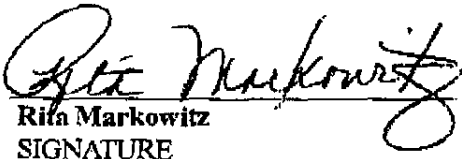
504 SW Sanctuary Drive

(P.O. Box or Mail Drop Box NOT Acceptable)

Port St. Lucie, FL 34986

(City / State / Zip)

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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.


Rita Markowitz
SIGNATURE

May 26, 2005

(Date)

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