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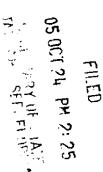
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Certified Copies	Certificate	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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TRANSMITTAL LETTER

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

SUBJECT:	INDIAN RIVER SALS	ATE NAME - MUST INCL	UDE SUFFIX)			
	al and one(1) copy of the artic			7		
图 \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status			
FROM:		Printed or typed) x 1050 121 Address				
	(772)	State & Zip - 539 - 8052 Telephone number	<u></u>	S. JR. BRY OF SIA	05 OCT 24 PM 2: 7	FILED

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
	•
ARTICLE I NAME	
The name of the corporation shall be: Indian River Subs of Vero, INC.	••
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: Po Box (5013)	
VEVO PSEACH, FL 32962	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
• •	
operate A Business	
ARTICLE IV SHARES	
The number of shares of stock is:	
100 ShALES	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s) and address(es):	
ADTICLE VI DECISTEDED ACENT	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	05 (
Nicholas R. Schiefolber	FILED DET 24 PM 2: 24
994 CHOLINA CITCLE SIO	22 2
VENO GENTH, FL 32962	
ARTICLE VII INCORPORATOR	FILED JARY OF 1ATT LINEY OF 1ATT
The <u>name and address</u> of the Incorporator is:	
NIEWIAS R. Schiefe DEN	
Vern Frach FL 32965	

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 Signature/Incorporator

10/19/05 Date