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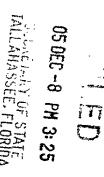
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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DECEMBER 6,2005

Thomas A. Maltese, 11 Enerry E. Steward P.O. Box 34048 Indialantic, Fe 32903

DEPARIMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

DEAR SIR DIE MADAM!

Enclosed please find a Cover Letter and proposed tricles of Incorporation for Starting a corporation under the name of Freaky Tiki, Inc

Also enclosed is a check (check#1039) in the amount of \$37.50 for filing fee, Certified Copy & certificate of Status, and a self-stamped envelope.

Sincerely,

Thomas A. maltese

Sherry E Struard

COVER LETTER

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

_{SUBJECT:} Freaky Tiki, Inc.		-
(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	
Enclosed are an original and one (1) copy of the arti \$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status
FROM: Thomas A. Maltese, II and	d Sherry E. Steward (Printed or typed)	
P.O. Box 34048	Address	w
Indialantic, FL 32903	, State & Zip	
321-412-1711 Daytime 1	Felephone 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)

LED

ARTICLE I NAME

The name of the corporation shall be:

Freaky Tiki, Inc.

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JEUREIARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. Box 34048 Indialantic, FL 32903

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To start and run a restaurant / hospitility business with the above name in the near future.

ARTICLE IV SHARES

The number of shares of stock is:

100 (one hundred) shares

ARTICLE V _ INITIAL OFFICERS AND/OR DIRECTORS

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

Owner / Director - Thomas A. Maltese, II

Owner / Director - Sherry E. Steward

ARTICLE VI <u>REGISTERED AGENT</u>

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

Thomas A. Maltese, II 995 Bianca Drive Palm Bay, FL 32905

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sherry E. Steward 995 Bianca Drive Palm Bay, FL 32905

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

Doto

12-01-05

Date