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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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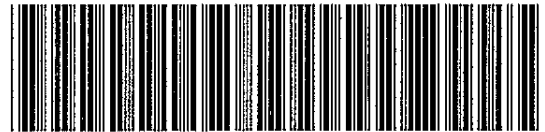
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 JAN 11 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 12 2005

W05-56495

GLENN ANDERSON

COUNSELOR AT LAW
56 FOURTH STREET N.W.
WINTER HAVEN, FLORIDA 33881
(863) 299-7348

December 20, 2005

Division Records Bureau
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32301

Attention: DOMESTIC CORPORATION SECTION
Re: Simmerin' Safari Café

Dear Sir:

Enclosed you will find an original and a copy of the Articles of Incorporation for the caption entity. Please certify the copy and return it to this office.

Also enclosed, is my trust check # 3317 in the amount of \$122.50 to cover the following items of costs concerning this transaction:

Filing Fees:	\$ 35.00
Certified copy of Articles	\$ 52.50
Certificate of Registered Agent	<u>\$ 35.00</u>
TOTAL	\$122.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please note that we have designated the Registered Agent in the Articles of Incorporation.

Thank you for your continued courtesy and cooperation in this matter.

Sincerely,



GLENN ANDERSON
Counselor at Law

GA/nls
Encl.

**ARTICLE OF INCORPORATION
OF
SHIMMERIN' SAFARI CAFÉ, INC.**

ARTICLE I – NAME

The name of this corporation is Shimmerin' Safari Café, Inc..

ARTICLE II – DURATION

This corporation is organized for the purposes of transacting any or all lawful business.

ARTICLE III – PURPOSE

This corporation is organized for the purposes of transacting any or all lawful business.

ARTICLE IV – CAPITAL STOCK

This corporation is authorized to issue 500 shares of ONE DOLLAR (\$1.00) par value common stock which shall be designated "Common Shares."

ARTICLE V – INITIAL REGISTERED OFFICE AND AGENT

The street address and mailing address of the initial registered office of this corporation is 73330 Bent Grass Dr., Winter Haven, FL 33884 and the initial registered agent of this corporation at that address is Barbara A. Robinson.

ARTICLE VI – ADDRESS OF PRINCIPAL OFFICE

The street address of the principal office is 3378 Cypress Gardens Rd, Winter Haven, FL 33884 and the mailing address of the principal office is 3378 Cypress Gardens Rd., Winter Haven, FL 33884.

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TALLAHASSEE, FLORIDA

ARTICLE VII – INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one. The name and address of the initial director of this corporation is:

Barbara A. Robinson
7330 Bent Grass Dr.
Winter Haven, FL 33884

ARTICLE VIII – INCORPORATIONS

The name and the person signing these articles is as follows and the address of such person is as stated in Article VI above:

Barbara A. Robinson

ARTICLE IX – MANAGEMENT OF CORPORATION BY SHAREHOLDERS

All corporate powers shall be exercised by or under the authority of, and the business and affairs of this corporation shall be managed under the direction of the shareholders of this corporation.

ARTICLE X – INDEMNIFICATION

This corporation shall indemnify an officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE XI – AMENDMENT

This corporation reserves the right to amend or repeal any provision contained in these articles of incorporation, or any amendment to them, and any right conferred upon the shareholder is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these
articles of incorporation on this 20th day of December, 2005


BARBARA A. ROBINSON

The undersigned hereby accepts the duty of the registered agent for the above
named corporation and is familiar with and accepts the duties and responsibilities as such
registered agent for said corporation.


BARBARA A. ROBINSON

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 20th day of
December, 2005, by Barbara A. Robinson.



Notary Public
My Commission Expires:



Glenn R. Anderson
MY COMMISSION # DD266112 EXPIRES
November 11, 2007
BONDED THRU TROY FAIN INSURANCE, INC.

Personally Known _____
Produced Identification Cal. Drivers license #C0098932

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA