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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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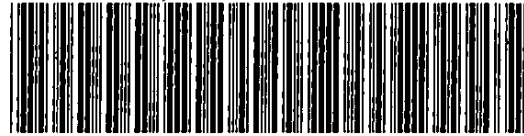
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 MAY 26 P 7:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-30-06
AC

COVER LETTER

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

SUBJECT: Local Boys Wing House, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Anthony Smith

Name (Printed or typed)

2464 South Atlantic Avenue, Suite A

Address

Cocoa Beach, Florida 32931

City, State & Zip

321-271-9142

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:

Local Boys Wing House, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2464 South Atlantic Avenue, Suite A
Cocoa Beach, Florida 32931

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Anthony Smith President
2464 South Atlantic Avenue
Cocoa Beach, Florida 32931

ARTICLE VI REGISTERED AGENT

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

Anthony Smith
2464 South Atlantic Avenue
Cocoa Beach, Florida 3293

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anthony Smith
2464 South Atlantic Avenue
Cocoa Beach, Florida 3293

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

5-23-08

Date

5-23-08

Date

FILED
2008 MAY 26 P 7:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA