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COVER LETTER

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

SUBJECT:	JOSEPHINE E	- NTERPRÍSE TENAME-MUSTINCLU	S, INC.	
Enclosed are an orig	rinal and one (1) copy of the arti	icles of incorporation and	a check for:	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy ADDITIONAL COI	Filing Fee, Certified Copy & Certificate of Status	
FROM: FRANK S. MANSELLA INC. CPA, MST Name (Printed or typed)				
653 HART LAKE DRIVE				
	WINTER for			
-	(863) 307 Daytime 1	7-3395 elephone number		

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2006

FRANK S MANSELLA, INC CPA, MST 653 HART LAKE DR WINTER HAVEN, FL 33884

SUBJECT: JOSEPHINE ENTERPRISES, INC.

Ref. Number: W06000032871

OF STATE ations

8/01/06

Please submit as

Josephine Restaurant Pizzeria
Enterprises, Inc.

We have received your document for JOSEPHINE ENTERPRISES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P03000111623 (JOSEPHINE'S ENTERPRISES, INC.).

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton **Document Specialist** New Filing Section

Letter Number: 306A00047099

NAME

ARTICLE I

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: Josephine Kestaurant Pizzeria Enterprises In	Li
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 127/ Semoran Blvd. Suite 153 Casselberry, FL 32707	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: To operate a restaurant serving food of beverages to the public and any other lawful business in accordance with the Laws of the state of Florida and the United States of America. ARTICLE IV SHARES The number of shares of stock is: FIVE HUNDRED SHARES OF COMMON, NO PAR VALUE	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s) addrass(as) and specific title(s):	
President, Peter Aiello 803 Toledo Drive Altamonte Springs, FL 32714	,
President, Peter Aiello 803 Toledo Drive ALtamonte Springs, FL 32714 Vice-Pres, , Peter Aiello Same	
Transverse Potes Hiells Same	
ARTICLE VI REGISTERED AGENT	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Peter Aiello 1271 Semoran Blvd. Suite 1594 Casselberry, FL 32707 ARTICLE VII INCORPORATOR	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the incorporator is: $P_{e} + e_{R} + H_{e} = 1/0$	
803 Toledo Daive	
ALTAMONTE SPRINGS, FL 32714	

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I app-familiar with and accept the appointment as registered agent and agree to act in this capacity	
certytcate, i aptyminate with that accept the appointment as registered agent and agree to act in this capacity	
7/20/06	
Signature/Registered Agent Date	
7/20/06 7/20/06 Date 7/20/06 T/20/06 T/20/06	
Signature/Incorporator Date	
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