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(Requestor's Name)			
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(Laurines Living)			
(Document Number)			
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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DIVISION OF CORPERATION
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COVER LETTER

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

SUBJECT:	MIOWAY PIZ	ZA AND SUBS		
SUBJECT: MIOWAY PIZZA AND SUBS (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
			,	
Enclosed are an orig	ginal and one (1) copy	of the articles of incorporation an	d a check for:	
\$70.00	\$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Sta	Filing Fee	Filing Fee,	
	& Certificate of Sta	tus & Certified Copy	Certified Copy & Certificate of	
			Status	
		ADDITIONAL CO	OPY REQUIRED	
	7	OE GRENAT		
FROM:				
	Name (Printed or typed)			
	3	3701 Dorset Way		
	Address			
	Tallahassee FL 32303			
	City, State & Zip			
		Olas and an artist		
	850- 510-2804			
	Daytime Telephone number			

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:	
MIDWAY PIZZA and SUBS INC.	DIVIS
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Mailing-Po. Box 84 business - 32563 Mailing-Po. Box 84 business - 32563 Milway FL 32343 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any and all Lawfull buisNess	FILED CRETARY OF STATE TON OF CORPORATIONS AN 16 PM 2: 48
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): CEO Joe GreNAT - 3701 Porset way THIRHASSEE FL 32303 VP Jennifer Kennedy - 477 Small Pond Rd. Havana FL 32 VP Jennifer Kennedy - 477 Small Pond Rd. Havana FL 32 President Ky BURNS - 1942 Larette DR #C Tallahassee President Ky REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Joe GreNAT 3701 DORSET WAY TALIAHASSEE FL 32303	333 PL 32301
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Joe GrenAt 3701 Dorsel Way THIAHASSEE FL 32303 **********************************	****
Having been named as registered agent to accept service of process for the above stated corporation at the place decertificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
hum 9	

Date

Signature/Registered Agent

Signature/Incorporator