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Division of Corporations

CAP AL CONNECTION

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To:  
Division of Corporations  
Fax Number : (850) 617-6381

From:  
Account Name : YOUR CAPITAL CONNECTION, INC.  
Account Number : I20000000257  
Phone : (850) 224-8870  
Fax Number : (850) 222-1222

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION

Papa Bees, Inc.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$70.00 |

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J. Shivers AUG 06 2009

**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:

Papa Bees inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

1025 Covington St.  
Oviedo, FL 32765**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Resturant

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Carrie Hicks President  
1025 Covington St.  
Oviedo, FL 32765**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Carrie Hicks  
1025 Covington St.  
Oviedo, FL 32765**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Carrie Hicks  
1025 Covington St.  
Oviedo, FL 32765

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation as the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Carrie J. Hicks  
Signature/Registered Agent

8/5/09  
Date

Carrie J. Hicks  
Signature/Incorporator

8/5/09  
Date

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