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## **COVER LETTER**

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

SUBJECT: A-1 FAMILY DINER INCORPORATE	C. TE NAME – <u>MUST INCLUDE SUFFIX</u> )	
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee  & Certified Copy Certificate of Status  ADDITIONAL COPY REQUIRED	
FROM: WILLIAM RODNEY SIZEMORE Name (Printed or typed)  2836 EAST FOREST LAKE DR		
Address  SARASOTA, FL 34232 City, State & Zip		
941-526-7883 Daytime Te	elephone number 26	
Daytime Telephone number  DENISEROD1@YAHOO.COM  E-mail address: (to be used for future annual report notification)		

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



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FLORIDA DEPARTMENT OF STATE

Division of Corporations

January 28, 2011

WILLIAM RODNEY SIZEMORE 2836 EAST FOREST LAKE DRIVE SARASOTA, FL 34232

SUBJECT: A-1 FAMILY DINER INC. Ref. Number: W11000005566

We have received your document for A-1 FAMILY DINER INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 511A00002470

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

ARTICLE I NAME A-1 FAMILY DINER INC. The name of the corporation shall be:	SECRETARY OF CORPURATION
•	2011 FEB 11 PM 4: 18
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address 5674 PALMER BLVD	Mailing address, if different is: 2836 EAST FOREST LAKES DR
SARASOTA FL 34232	SARASOTA FL 34232
OALVAOVIA, ILL VIIVA	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
RESTAURANT	
ARTICLE IV SHARES	
The number of shares of stock is:1000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: DENISE YAHRAUS, TREASURER	Name and Title:
Address: 2836 EAST FOREST LAKES DR	Address:
SARASOTA FL 34232	
·	
Name and Title: WILLIAM R. SIZEMORE, PRES.	Name and Title
Address: 2836 EAST FOREST LAKES DR	Address:
SARASOTA, FL 34232	
Name and Tale.	Name and Title.
Name and Title: Address:	
Addices.	Address:
ADTICLE III DECISTEDED ACTET	
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address and the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name and Florida street address (P.O. Box NOT acceptable) of the name address (P.O. Box NOT acceptable) of the name address (P.O. Box NOT acceptable) and the name address	he registered agent is:
Name: WILLIAM R. SIZEMORE	nie registereu agent is.
Address: 2836 EAST FOREST LAKES DR	
SARASOTA, FL 34232	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: WILLIAM R SIZEMORE	
Address: 2836 EAST FOREST LAKES DR	
SARASOTA, FL 34232	
Having been named as registered agent to accept service of process	for the above stated corneration at the place designated in
this certificate, I am familiar with and accept the appointment as regis	
hullt	01/20/2011
Required Signature/Registered Agent	 Date
I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felony	
and an income to the Department of State constitutes a third degree fetting	us provincu jor in s.017.133, 1'.5.
( 100 2 miles	01/20/2011
Required Signature/Incorporator	Date