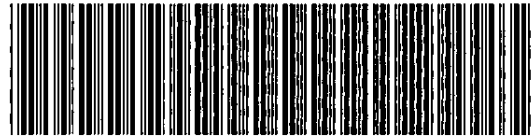


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

T. Burch AUG 19 2011

COVER LETTER

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

SUBJECT: ROYAL PALMS INTERNET CAFE, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: DARREL HACKETT
Name (Printed or typed)

7326 SE12TH CIRCLE
Address

OCALA, FL. 34480
City, State & Zip

352-266-4818
Daytime Telephone number

HACKETT7@COX.NET
E-mail address: (to be used for future annual report notification)

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 ROYAL PALMS INTERNET CAFE, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
8960 SW STATE ROAD 200
SUITE 1
OCALA, FL. 34481

Mailing address, if different is:

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To engage in the entertainment business without limitation and all things related thereto and every legal business as permitted under the laws of the State of Florida and the United States of America

ARTICLE IV SHARES
The number of shares of stock is: 1000 shares of common stock with a nominal or par value of \$1.00 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: IRIS HACKETT, PST	Name and Title: _____
Address: 7326 SE 12TH CIRCLE	Address: _____
OCALA, FL. 34480	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: DARREL HACKETT
Address: 7326 SE 12TH CIRCLE
OCALA, FL. 34480

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: IRIS HACKETT & ANTOINETTE IORIO
Address: 7326 SE 12TH CIRCLE 11082 SW 73RD CIRCLE
OCALA, FL. 34480 Ocala, FL. 34476

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

Darrel Hackett August 15, 2011
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Iris Hackett Antoinette Iorio August 15, 2011
Required Signature/Incorporator Date
IRIS HACKETT ANTOINETTE IORIO