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CORPORATE FILING SERVICE

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ORPORATION NAME(S) & DOCU	JMENT NUMBER(S), (if known):	
CRAZY KNIF	CE CATERING INC	-1
(Corporation Name)	(Document #)	
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Other	Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partnership	
Productus Paine	Reinstatement	
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	Examiner's Initials	

CR2E031(7/97)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 AUG 16 AM 8:21

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I – NAME

The name of the corporation shall be:

CRAZY KNIFE CATERING

ARTICLE II-PRINCIPAL OFFICE

INC

The principal place of business and mailing of this corporation shall be:

902 SW 126th AVE CNIAMI FL 33184

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANNA CHASOMERI 902 SW 126H AVE MIAMI FZ 33184

SECRETARY OF STATE DIVISION OF CORPORATIONS

12 AUG 16 AM 8: 21

ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

ANNA CHASOMERI 902 SW 1264 AVE MIAMI FL 33184

The undersigned incorporator has executed these Articles of Incorporation this

_____/ 3____ day of ______ AUGUST 20 / 2___.

ARTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

ANNA CHASOMERI 902 SW 126# AVE MIAMI FL 33184 IOANNA LAZAROU 902 SW 126th AVE (MIAMI FL 33184

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.