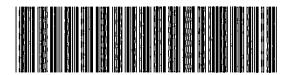
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## **COVER LETTER**

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

SUBJECT: THE MEATBALL SHOPPE Inc.				
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:	
■ \$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,	
1 ming 1 cc	& Certificate of Status	& Certified Copy	Certified Copy	

Status
ADDITIONAL COPY REQUIRED

& Certificate of

)M·	Jeff Morgia
<i>7</i> 1 <b>41.</b>	Name (Printed or typed)
	611 Hardwood Circle
	Address
	Orlando, FL. 32828
	City, State & Zip
	321-276-8110
	Daytime Telephone number
	jeff@foodwithpassion.com
	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)

The name of the corporat	tion shall be: THE MEATBAL	LSHOPE	PE Inc.		_
ARTICLE II PRINCIPAL OFFICE Principal street address 611 Hardwood Circle		Mailing address, if different is:			
Orlando, FL					
ARTICLE III PUR The purpose for which the	POSE he corporation is organized is:  To pro	tect owne	ership of the	nan	ne
				W.	E
				AUG 29	St. A.
ARTICLE IV SHA The number of shares of	stock is:			PH 12: 36	MALL THE LINE.
	rial officers and/or director Jeff Morgia, CEO		Isabella Morgia, P	reside	ent
Address	611 Hardwood Circle Orlando, FL. 32828	Address:	611 Hardwood Orlando, FL	Circle	<del></del>
Name and Title Address	:				
Name and Title Address	:		:		

Name and Title:		Name and Title:		
Address		Address:		
ARTICLE VI	REGISTERED AGENT			
The name and Flo	orida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name:	Jeff Morgia			
Address:	611 Hardwood Circle			
	Orlando, FL. 32828	AUC Specific and the second se		
ARTICLE VII	INCORPORATOR	29 P		
The name and add	dress of the Incorporator is:	PH 12:		
Name:	Jeff Morgia	ယ် နှံ့ရှိ ယ နှံ့ရှိ		
Address:	611 Hardwood Circle			
	Orlando, FL. 32828			
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity		
	Required Signature/Registered Agent	8/18/14		
	Required Signature/Registered Agent	Date		
I submit this docu document to the D	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.		
Sp.	mg-	8/18/14		
	Required Signature/Incorporator	Date		