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12/8/15

NAME:

WHISKEY JOE'S BAR & GRILL, INC.

TYPE OF FILING: ARTICLES

COST:

87.50

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE



December 9, 2015

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314

Re:

Whiskey Joe's Bar & Grill, Inc.

Ref. No. W15000079225

Dear Sir or Madam:

We are in receipt of your December 9, 2015, notice rejecting our filing for Whiskey Joe's Bar & Grill, Inc. as the name is unavailable and conflicts with the entity Whiskey Joe's Bar & Grill (TI1400000154). Please be advised that Specialty Restaurants Corporation is the owner of both entities, Whiskey Joe's Bar & Grill, Inc., and Whiskey Joe's Bar & Grill (T14000001154) and the related trademark (please see attached Florida Department of State Detail Report).

Accordingly, it is respectfully requested that the Florida Department of State – Division of Corporations, file all documents submitted for the formation of Whiskey Joe's Bar & Grill, Inc.

Thank you for you professional courtesy and cooperation.

Very truly yours.

Francis M. Drelling
Vice President/General Counsel

COVER LETTER

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

.;

SUBJECT: WHISK	EY JOE'S BAR & GRILL, INC.			
30b3EC1;	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	
FROM:	Nam	e (Printed or typed)		
		Address		
	City	, State & Zip		
	Daytime Telephone number			
_	E-mail address: (to be us	ed 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)

re name of the corporation shall be: RTICLE II PRINCIPAL OFFICE Principal street address			Mailing address, if different is:	
8191 E. Kniser Blve	1.			
Anaheim, CA 9280	8			
ARTICLE III PU The purpose for whi	RPOSE ich the corporation is organized is: ing services, beach and water activities a	anage, own and/or operate one or	more restaurants, bars,	
Special event, catern		The Control of the Co		
	millions (by an idellar), deriv spar som som som som til 17 p.A		,	
	** Minimum of the specific of		THE STATE OF	
ARTICLE IV SH				
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRECTO	<u>RS</u>		
ARTICLE V IN	Title:		Tallichet, Vice President	
	Title: John Tallichet, President	Name and Title: Cecilia	,,,	
Name and	Title: John Tallichet, President	Name and Title: Cecilia Address: 8191 E.	Tallichet, Vice President	
Name and	Title: Hohn Tallichet, President 8191 E. Kaiser Blvd.	Name and Title: Cecilia Address: 8191 E.	Tallichet, Vice President Kaiser Blvd.	
Name and Address	Title: Hohn Tallichet, President 8191 E. Kaiser Blvd.	Name and Title: Cecilia Address: Anaheir	Tallichet, Vice President Kaiser Blvd. m, CA 92808	
Name and Address	Title: John Tallichet, President 8191 E. Kaiser Blvd. Anaheim, CA 92808	Name and Title: Cecilia Address: 8191 E. Anaheir Name and Title:	Tallichet, Vice President Kaiser Blvd. m, CA 92808	
Name and Address Name and T	Title: John Tallichet, President 8191 E. Kaiser Blvd. Anaheim, CA 92808	Name and Title: Address: Anaheir Name and Title:	Tallichet, Vice President Kaiser Blvd. m, CA 92808	
Name and Address Name and T Address	Title: John Tallichet, President 8191 E. Kaiser Blvd. Anaheim, CA 92808	Name and Title: Address: Anaheir Name and Title: Address:	Tallichet, Vice President Kaiser Blvd. m, CA 92808	
Name and Address Name and T Address	Title: John Tallichet, President 8191 E. Kaiser Blvd. Anaheim, CA 92808	Name and Title: Address: Anaheir Name and Title: Address:	Tallichet, Vice President Kaiser Blvd. m, CA 92808	

Name an	d Title:	Name and Title:	
Address	a construence de la construence del la construence de la construence del la construence de la construe	Address	
	REGISTERED AGENT Orida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Paracorp Incorporated	-	
Address:	155 Office Plaza Drive 1st Floor		540 G
Auguress.	Tallahassee, FL 32301		
ARTICLE VII	INCORPORATOR		-8 PH
The name and a	ddress of the Incorporator is:		
Name:	Francis M. Drelling		इंस ज
Address:	8191 E. Kaiser Blyd.		
	Anaheim, CA 92808		
Effective date, if	EFFECTIVE DATE; other than the date of filing: date is listed, the date must be specific and calling.)	. (OPTIONAL) nanot be more than five business da	rys prior or 90 business
	e inserted in this block does not meet the applic effective date on the Department of State's reco		s date will not be listed as
	med as registered agent to accept service of pro am familiar with and accept the appointment o		
See A	Attached Document		
	Required Signature Registered Agent		Date
	cument and affirm that the facts stated herein Department of State constitutes a third degree		
.—/	1 - crell		Dec. 3, 2015
Ren	fired Signature/Incorporator		Date

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 12/04/2015

ENTITY NAME: WHISKEY JOE'S BAR & GRILL, INC.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Sharon Cooke, Assistant Secretary

Paracorp Incorporated

Sharon Corse