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TRANSMITTAL LETTER

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TABLANAULTURE OF THE

Department of State Division of Corporations P. C. Box 6327 Talkihassee, FL 32314

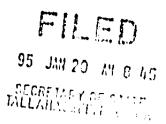
Protes 1	tulia Inc	700001392477 -01/30/9501030004 +****70.00 *****70.00
JUUJEU11	trilin, Inc. posed corporate name - must include suffix)	
Enclosed is an original a	nd one (1) copy of the articles of incorporation ar	nd a check
for :	\$78.75 \$122.50 \$131.25	
FROM:	Azat Masoud	
,	Name (printed or typed)	
	3520 Jamaica Run Lane, #1609	
	Address	
	Kissinnee, FL 34741	
	City, State & Zip	
	(407) 847-4651	

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

Daytime Telephone number

N. 25 95

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:

Taste Italia, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3815 W. Vine Street Kissimmee, FL 34741

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Azat Masoud 3520Jamaica Run Lane, #1609 Kissimmee, FL 34741

ARTICLE V INCORPORATORISI

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

Azat Masoud 3520 Jamaica Run Lane, #1609 Kissimmee, FL 34741

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12th day of January , 19 95 .

HART WASOUD
Signature
Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:_	Taste Italia, Inc.	<u></u>
	•		
2.	The name and address of the reg	gistered agent and office is:	
	Azat Masoud		78 9
		(Name)	
	3520 Jamaica R	un Lane, #1609	1 20
	.· (P.O). Box not acceptable)	
	Kissimmee, FL	34741	
		(City/State/Zip)	1 1

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

XARAT HUSOUD Date