

P95000014629

TRANSMITTAL LETTER

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

SUBJECT: LONG BRANCH SALON & STEAKHOUSE, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

LARRY MORTON

Name (printed or typed)

5353 BONLINE BEND

Address

NEWPORT RICHEY, FL. 34652

City, State & Zip

813-842-9955

Daytime Telephone number

95 FEB 20 AM 9:06

STATE OF FLORIDA
DIVISION OF CORPORATIONS

KAN 2-22

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

ARTICLES OF INCORPORATION

95 FEB 20 AM 9:06

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:

LONG BRANCH SALOON & STEAKHOUSE INC.

ARTICLE II PRINCIPAL OFFICE

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

*2730 GRAND BLVD.
HOLIDAY, FL. 34690*

ARTICLE III SHARES

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

100 SHARES ¹/₁ PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LARRY MORTON

ARTICLE V INCORPORATOR(S)

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

LARRY MORTON
5353 BONLINE BLVD
NEW PORT RICHEY, FL. 34652

JUDITH A. WELLS
5616 RIDDLE RD.
HOLIDAY, FL. 34691

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

17TH day of FEBRUARY, 19 95.

Larry Morton
Signature
Judith A. Wells
Signature

Signature

**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: LONG BRANCH SALOON &
STEAKHOUSE, INC.

2. The name and address of the registered agent and office is:

LARRY MORTON
(Name)
5353 BOWLINE BEND
(P.O. Box not acceptable)
NEWPORT RICHEY, FL. 34652
(City/State/Zip)

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.

Larry Morton
(Signature)

2-1-82
(Date)