# P95000031420

Keith Poole, P.C. 2010 Huntwick Lane Roswell, GA 30075 (404) 640-0084

April 19, 1995

Secretary of State
State of Florida
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

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Dear Secretary of State:

I am requesting that you incorporate Jaguar Pizza, Inc. Enclosed please find the following materials:

- 1. Propriginal and two copies of the Articles of Incorporation;
- 2. A check in the amount of One hundred twenty two dollars and fifty cents; and
- 3. The original signed Certificate Designating Registered Agent/Registered Office.

If there are any questions regarding this matter, please call or write me. Thank you for your assistance on this matter.

Willwort

Very truly yours,

NANCY HENDRICKS APR 2 1 1995

## ARTICLES OF INCORPORATION OF JAGUAR PIZZA, INC.

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SECRETARY OF STATE
TALLAHASSI ELET ORDER

The undersigned, for the purpose of forming and organizing a corporation pursuant to the provisions of the Florida General Corporation Act does hereby adopt the following Articles of Incorporation.

#### ARTICLE I

The name of the corporation shall be known as JAGUAR PIZZA, INC. The principal place of business of the corporation shall be at 9802-1 Baymeadows Road, Jacksonville, FL 32256.

#### ARTICLE II

This Corporation is organized pursuant to the provisions of the Florida General Corporation Act.

#### ARTICLE III

The Corporation shall have perpetual duration.

#### ARTICLE IV

The corporation is a corporation for profit and pecuniary gain and is organized for the general purpose of owning and operating restaurant franchises and for engaging in any lawful purpose not specifically prohibited under the Florida General Corporation Act. The corporation is organized to do any and all acts necessary, convenient, expedient, ancillary or in aid to the accomplishment of its purposes and shall in addition be authorized without limitation to operate in any legal business authorized by law for the purpose of making a profit or pecuniary gain.

#### ARTICLE V

The corporation shall have authority, acting by its Board of Directors, to issue not more than 10,000 shares of Series A common stock, all of which shall be shares without par value.

#### ARTICLE VI

The initial Board of Directors shall consist of two members:

Michael O. Esmond 9802-1 Baymeadows Road Jacksonville, FL 32256

Stuart Blackwell 8756 Rolling Brook Lane Jacksonville, FL 32256

#### ARTICLE V'I

The name and address of the incorporator is Keith Poole, 2010 Huntwick Lane, Roswell, GA 30075.

#### **ARTICLE VIII**

The corporation shall be authorized to select to use the provisions of Section 1362 of the Internal Revenue Code and to exercise any other further options, including but not limited to Section 1244, as deemed advisable or available under the rules and regulation of the Internal Revenue Service.

#### ARTICLE IX

The registered agent shall be Stuart Blackwell. The address of the registered agent is 8756 Rolling Brook Lane, Jacksonville, Florida 32256. The office of the registered agent is 8756 Rolling Brook Lane, Jacksonville, Florida 32256.

#### ARTICLE X

Members of the Board of Directors will be elected by cumulative voting.

IN WITNESS WHEREOF, the undersigned incorporator has executed the Articles of Incorporation this day of April, 1995.

Keith Poole Attorney at Law 2010 Huntwick Lane Roswell, GA 30075 (404) 640-0084

### CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325 of the Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/agent, in the State of Florida.

- 1. The name of the Corporation is JAGUAR PIZZA, INC.
- 2. The name and address of the registered agent and office is Stuart Blackwell, 8756 Rolling Brook Lane, Jacksonville, Florida 32256.

SIGNATURE Stuart Blackwell SECRETARY

DATE 4/20/95

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL THE STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE\_

Stuart Blackwell

DATE 4/20/95

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SECRETARY OF STATE

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

#### **APPLICATION** FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Socrolary of State

DIVISION OF COMPGNATIONS

**DOCUMENT #** 

L. Corporation Name

P95000031420

JAGUAR PIZZA, INC.

Principal Place of Dissessa.

MODA RAYMEADOWS DO

Mailing Address

FILED 96 NOV 25 PM 1: 16 SECRETARY OF STATE TALLAHASSEE, FLORIDA

| JACKSOMVILLE FL 32256           |   |   | JACKSONVILLE FL 32298   |                        |  |   |  |   |                 |  |
|---------------------------------|---|---|---|------------------------|--|---|--|---|-----------------|--|
| If above<br>2. Now P            | e inddresses are incorrect in any way, lin<br>Principal Office Address, if Applicable   | o through incorred<br>3. New M                                | ct information and ont<br>inling Office Address,  | er correction belo     | REINSI                                 | TATEME  | NO   | 0   |                 |  |
| Suite, Api                      | 4. N, atc   | Suito, Apt  | Suite, Apt. W, etc.   |                        |  | To Do Businose in Florida 04/21/1985  |  |   |                 |  |
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| Zφ                              | Country   | Zφ  | Cour  | ntry                   | CERTIFICA                              | NTE OF STATUS DESIRE  |  | Not Ap  | PHENDIB         |  |
| 7. Namo                         | s and Street Addresses of Each Officer  | and/or Director (i  | Florida nonprofit corpo   | entions must list at i |  |   |  |   | ·               |  |
| Tillo(s)                        | Name of Officers  |   | Street Address of Each<br>Officer and/or Dire; for<br>3 (De NOT Use Post Office Box Numbers |                        |  | ······································  |  |   |                 |  |
| D                               | ESMONT, MICHAEL O   |   | 9902-1 BAYME  |                        | JACKSOMMLLE                            | ONMILLE FL 32260  |  |   |                 |  |
| D                               | BLACKWELL, STUART   |   | 8756 ROLLING BROOK LANE   |                        |  | JACKSONNILLE FL 32266   |  |   |                 |  |
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| <del></del>                     |   |   |   |                        |  | Pento   | 25/91  | 0   |                 |  |
|                                 | 8. Name and Address of Curre  | nt Registered Ag  | jent  |                        | 9. Name and                            | Accepte of New Rogi   | stered Ager                                    | nt  |                 |  |
| BLACE                           | KWELL, STUART   |   | Name  |                        |  |   |  | ŝ   |                 |  |
|                                 | ROLLING BROOK LANE  | Stront Address (P.O. Box Nu                                   |   |                        | ber is Not Acceptable)                 |   |  |   |                 |  |
| JACKS                           | SOMMLLE FL 32256  | Suite, Apt. #, E'z.   |   |                        | · · · · · · · · · · · · · · · · · · ·  |   |  |   |                 |  |
| 1                               |   |   |   | City                   | <del></del>                            | ······································  | State Zi                                       | p Code  |                 |  |
| Signature of<br>Registered A    | Agent LLC LLC   | ul-   | orntion, am familiar w<br>ENT MUST SIGN   | ith and accept the o   | bligations of Secti                    | Date  | 6(96   |   |                 |  |
| II. Do:<br>Dej                  | es this corporation pay<br>pt. of Revenue under S   | any intang<br>. 199.032,                                      | ible tax to th<br>Florida State   | e<br>utes. Yes         | IJNo [                                 | (Sea a  | ther side for<br>on intengible                 | information<br>tax.)                                      |                 |  |
| 2. I certify this reins owed by | that tam an officer or director or the rectatement application, the reason for distinct or paid and the corporation have been paid and the pplication is true and mountaine, and my | oiver or trustee en<br>solution has been<br>spames of individ | npowered to execute a<br>eliminated, the corpo  | this application as p  | rovided for in cha<br>the requirements | pter 607 or 617, F.S. I<br>of section 607.0401 or<br>ler section 119.07(3)(i) | further centif<br>617.0401, F<br>, F.S. The in | y that when filir<br>.S., that all fee<br>formation indic | ng<br>s<br>atod |  |
| SIGNATI                         | URE: SENATURE AND TYPED OR P  | HINTED NAME OF S  | IONING OFFICER OR D   | IRECTOR                |  | 9/14/96   | 904-   | 363-14  | 15              |  |