P95000050377

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

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SUBJECT: <u>OLYMPIA RESTAURANT INC.</u>
(Proposed corporate name - must include suffix)

Enclosed is an <mark>origina</mark> for :	i and one (1) co	py of the articles of	incorporation a	nd a ch	eck	
\$79.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required		55 JUN 26 PH	TO THE SECOND
FROM:	SPIROS Name (E. DOLO	S	4	3	
	4504 B	CIVVIEW S Address	treet_			
		rlotte, Tl.	33948			
	941 - Daytime	764 - 140 Telephone number	9			

SDG

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

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:

OLYMPIA RESTAURANT, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Place of business: 3245 Tamiami Trail Port Charlotte, Fl. 33952

Mailing address: 4504 Bayview Street Port Charlotte, Fl. 33948

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Spires E. Dolos 4504 Bayview Street Port Charlotte, Fl. 33948-2450

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Spiros E. Dolos, 4504 Bayview Street
Port Charlotte, Fl. 33948-2450

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	Olympia Restaurant Inc.
2. The name and address of the reg	gistered agent and office is:
Spiros	E. Dolos (NAME)

4504 BOVVIEW Street
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Port Charlotte, Tl. 33948

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 societies 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.

(SIGNATURE) (DATE) (DATE)