

P96000022423

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

No 52578

RE: CASCADES FINANCIAL INC.

96 MAR 12 PM 4:06

SECRETARY OF STATE DISBURSED
TALLAHASSEE, FLORIDA

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

☒ Capital Express™

☐ Art. of Inc. File _____

☐ Corp. Record Search _____

☐ Ltd. Partnership File _____

☐ Foreign Corp. File _____

☒ () Cert. Copy(s) _____

☐ Art. of Amend. File _____

☐ Dissolution/Withdrawal _____

☐ C U S _____

☐ Fictitious Name File _____

☐ Name Reservation _____

☐ Annual Report/Reinstatement _____

☐ Reg. Agent Service _____

☐ Document Filing _____

☐ Corporate KII _____

☐ Vehicle Search _____

☐ Driving Record _____

☐ Document Retrieval _____

☐ UCC 1 or 3 File _____

☐ UCC 11 Search _____

☐ UCC 11 Release _____

☐ File No.'s, _____ Copies _____

☐ Courier Service _____

☐ Shipping/Handling _____

☐ Phone () _____

☐ Top Priority _____

☐ Express Mail Prep. _____

☐ FAX () _____ pgs. _____

SUBTOTALS _____

FEE.....

DISBURSED.....

SURCHARGE.....

TAX on corporate supplies.....

SUBTOTAL.....

PREPAID.....

BALANCE DUE.....

REQUEST TAKEN CONFIRMED APPROVED

DATE 3/12/96 _____

TIME 1:20 _____ CK No. _____

BY C.D _____

WALK-IN
Will Pick Up _____

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts

THANK YOU
from

FILED

ARTICLES OF INCORPORATION

06 MAR 12 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OF

Cascades Diner, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **Cascades Diner, Inc.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 12412 Oakleaf Ave., Tampa, FL 33612.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE V: INCORPORATOR

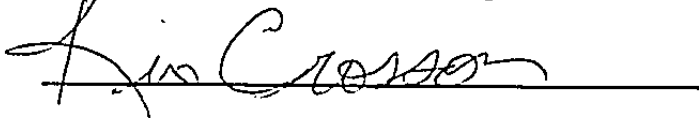
The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors of the corporation is Rafael Lopez, 10051 N. Dale Mabry, Tampa, FL 33612.

The undersigned has executed these Articles of Incorporation this 12th day of March 1996.

"Capital Connection, Inc. by Kim Crosson, Office Manager"

A handwritten signature in cursive script, appearing to read "Kim Crosson", is written over a horizontal line.

FILED

96 MAR 12 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

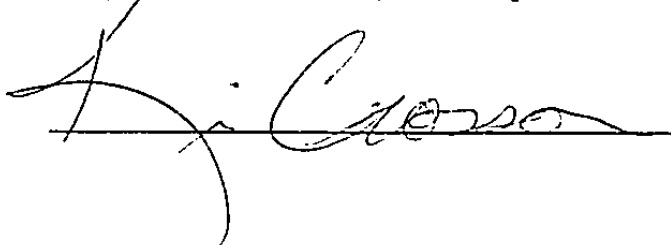
Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the state of Florida.

1. The name of the corporation is **Cascades Diner, Inc.**

2. The name and address of the registered agent and office is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

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.

"Capital Connection, Inc. by Kim Crosson, Office Manager"

A handwritten signature in dark ink, appearing to read "Kim Crosson", is written over a horizontal line.

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(904) 224-8870 • 1-800-342-8062 • Fax (904) 222-1222

P96000022423

Cascades Diner, Inc.

900002294729--9
-07/10/97--01032--015
****350.00 ****87.50

- FILED**
97 JUL 10 PM 12:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA
- RECEIVED**
97 JUL 10 AM 9:57
DIVISION OF CORPORATIONS
- ___ Art of Inc. File _____
 - ___ LTD Partnership File _____
 - ___ Foreign Corp. File _____
 - ___ L.C. File _____
 - ___ Fictitious Name File _____
 - ___ Name Reservation _____
 - ___ Merger File _____
 - ___ Art. of Amend. File _____
 - ✓ **RA Resignation** _____
 - ___ Dissolution / Withdrawal _____
 - ___ Annual Report / Reinstatement _____
 - ___ Cert. Copy _____
 - ___ Photo Copy _____
 - ___ Certificate of Good Standing _____
 - ___ Certificate of Status _____
 - ___ Certificate of Fictitious Name _____
 - ___ Corp Record Search _____
 - ___ Officer Search _____
 - ___ Fictitious Search 7/10 _____
 - ___ Fictitious Owner Search _____
 - ___ Vehicle Search _____
 - ___ Driving Record _____
 - ___ UCC 1 or 3 File _____
 - ___ UCC 11 Search _____
 - ___ UCC 11 Retrieval _____
 - ___ Courier _____
- RA Design*

Signature _____

Requested by: W.L.

Name _____

Date 7/10

Time 9:00

Walk-In _____

Will Pick Up _____

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Capital Connection, Inc.

(Name of registered agent)

hereby resigns as Registered Agent for Cascades Diner, Inc.

(Name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.


(Signature of resigning agent)

If signing on behalf of an entity:

Weimar Lopez

(Typed or Printed Name)

Registered Agent Coordinator

(Capacity)

FILED
97 JUL 10 PM 12:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation