

DIVISION OF CORPORATIONS (O:

FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

PAX #: (305)541-3770

VAME: CARPACCIO OF BROWARD, INC.

AUDIT NUMBER...... H96000016373

DOC TYPE..... FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...0

PAGES..... 7

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

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ENPIRE CORPORATE KIT

91:11 9661-02-000

H96000016373

ARTICLES OF INCORPORATION

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CARPACCIO OF BROWARD, INC.

I, the undersigned incorporator of this corporation under Florida Statute 607, as amended, do hereby associate myself to form a corporation and adopt the following Articles of Incorporation.

ARTICLE I

The name of this corporation is:

CARPACCIO OF AYOMARD, INC.

The mailing address for the lomporation is

TE MOTOR

PURPOSE AND SATURE OF BUSINESS

The purposes of this corporation and general nature of the business to be conducted are as follows:

A. To engage in any business activity or endeavor which is lawful under the laws of the State of Florida, and the United States of America.

THIS INSTRUMENT PREPARED BY:
MAYNARD J. HELLMAN, ESQUIRE
FLORIDA BAR NO. 137411
1100 FONCE DE LEON BLVD.
CORAL GABLES, FLORIDA 33134
(305) 448-8282

ARTICLE III

DURATION OF CORPORATION

This corporation is to have perpetual existence commencing on the date of execution and acknowledgment of these Articles of Incorporation.

CAPITAL STOCK

The maximum number of shares of stock which this corporation is authorized to have outstanding at any one time is one hundred (100) shares of Common Stock, each share having no par value.

ARTICIA V

INITIAL CAPITAL CONTRIBUTION

The amount of capital with which this corporation shall begin business shall not be less than Five Hundred (\$500.00) Dollars.

ARTICLE VI

SUBSCRIBERS

The name and address of the subscriber of these Articles of Incorporation and the number of shares he has elected to take are as follows:

SUBSCRIBER

ADDRESS

NUMBER OF SHARES

MAYNARD J. HELLMAN 1100 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

100

ARTICLE VII

DIRECTORS

The initial number of Directors of this corporation shall be

2

one (3). The number of Directors may either be increased or decreased from time to time by a vote of the stockholders in conformity with the By-Laws of the Corporation but shall never be less than one (1).

ARTICLE VIII

INITIAL BOARD OF DIRECTORS

The names and addresses of the members of the initial Board of Directors who, subject to the provisions of the Certificate of Incorporation, the By-Laws and the Corporation Laws of the State of Florida, shall hold office for the first year of the corporation's existence, or until their successors are elected and qualified, are:

ADDRESS

THOMAS BILLANTE

1100 PONCE DE LEON BLVD. CORAL GABLES, FLORIDA 33134

PIERO FILIP

1100 PONCE DE LEON BLVD. CORAL GABLES, FLORIDA 33134

MANUEL POUCAR

1100 PONCE DE LEON BLVD. CORAL GABLES, FLORIDA 33134

ARTICLE IX

VOTING RIGHTS

Except as otherwise provided by law, the entire voting power for the election of Directors and for all other purposes shall be vested exclusively in the holders of the outstanding common shares.

3

ARTICLE X

PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE XI

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 1100 PONCE DE LEON BLVD., CORAL GABLES, FLORIDA, and the name of the initial Registered Agent of this corporation at that address is MAYNARD J. HELLMAN.

ARTICLE XII

INDEMNIFICATION

The corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

DATED this _/K day of November, 1996.

STATE OF FLORIDA)
)SS
COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared MAXNARD J. HELLMAN, to me well known to be the person described in

4

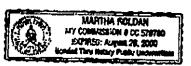
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and who executed the foregoing Certificate of Incorporation, who acknowledged before me, according to law, that he made and subscribed the same for the purposes therein mentioned and forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Coral Gables, Dade County, Florida, this 18 day of November, 1996.

Notary Public, State Florida at Large

My Commission Expires:



H96000016375

CARPACCIO OF BROWARD, INC.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
PURPOSES OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS
MAY BE SERVED
IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:
FIRST, THAT CARPACCIO OF BROWARD, INC. IS DESIRING TO ORGANIZE
OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS
PRINCIPAL PLACE OF BUSINESS AT THE CITY OF MIAMI. STATE OF
FLORIDA, HAS NAMED MAYNARD J. HELLMAN, ESQUIRE, AT 11C0 DONCE DE
LEON BOULEVARD, CORAL GABLES, STATE OF FLORIDA AS ITS AGENT TO
ACCEPT SERVICE OF PROCESS WITHIN FLOREDA.
Signature: MAYNARD J. HELLMAN
Title: Subscriber
Date: 11-18-96
Having been named to accept services of process for the above of
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 statutes relative to the proper
and complete performance of my duties
MAYNARD J. HEALMAN (Registered Agent)
Dobos 11 14 . O.C.

6

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articles/i:\od

ACCOUNT NO. : 072100000032

REFERENCE : 405222 82917A

AUTHORIZATION_:

ORDER DATE : May 27, 1997

ORDER TIME : 1:28 PM

ORDER NO. : 405222-005

CUSTOMER NO: 82917A

900002191989--0

CUSTOMER: Odalys Licea, Legal Asst

Hellman & Maas

1100 Ponce De Leon Boulevard

Coral Gables, FL 33134

DOMESTIC AMENDMENT FILING

NAME: CARPACCIO OF BROWARD, INC.

W97000019335

EFFICTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

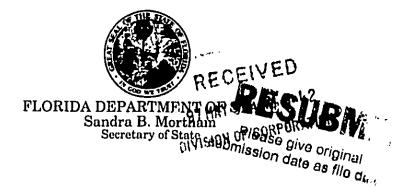
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY

_ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tonya C Holliday

EXAMINER'S INITIALS:



May 27, 1997

CSC TONYA TALLAHASSEE, FL

SUBJECT: CARPACCIO OF BROWARD, INC.

Ref. Number: P96000094942

We have received your document for CARPACCIO OF BROWARD, INC. and the authorization to debit your account in the amount of \$87.50. However, the document has not been filed and is being returned for the following:

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

'f you have any questions concerning the filing of your document, please call (904) 487-6957.

MAY 1241

Joy Moon-French Corporate Specialist

Letter Number: 397A00028609

ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION OF CARPACCIO OF BROWARD, INC.

FILED 97 MAY 27 PM 3: 27

THE UNDERSIGNED, President and Secretary of CARPACCIO OF BROWARD, INC., certifies that the following Amendments to the Articles of Incorporation CARPACCIO OF BROWARD, INC., have been adopted and unanimously approved by the Board of Directors and Shareholders of the above-named corporation:

The amendment was adopted on May 12, 1997.

ARTICLE I

CORPORATE NAME

The name of this Corporation shall be changed to:

MEZZOGIORNO, IN

IN v/ITNESS WHEREOF, the undersigned do hereunto place their hands and seals as the President and Secretary of the Corporation, this 12th day of May, 1997.

PRESIDENT:

THOMAS BILLANTE

SECRETARY:

THOMAS BILLANTE

STATE OF FLORIDA

COUNTY OF DADE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgements, personally appeared THOMAS BILLANTE, as President and Secretary of CARPACCIO OF BROWARD, INC., to me known to be the persons described in and who executed the foregoing instrument and acknowledged before me that they executed the same, and who have produced a driver's license for identification and who did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this

12th day of May, 1997.

NOTARY PUBLIC, STATE/OF FLORIDA

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