Department of State Division of Corporation P. O. 6327	ons				
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SUBJECT: Grazi	's Pastry Cafe,	Inc.	蜂味味	*131.25 ****131.2S	
		name – must include s	uffix)		
Enclosed is an originator:	al and one (1) cop	y of the articles of inco	orporation and a c	heck	
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	X \$131.25 Filing Fee, Certified Copy & Certificate		
Please return the phot	locopy to me with	the filing date stampe	d on it.	02 AON 96	
FROM:	Graziella	Spenger-Hediger		3 0	
		Name (printed or typed)		<u></u>	
	501 First	501 First Street		,	
	Address				
	Orlando, FL 32824				
	<u>_</u>	City, State & Zip			
	407/857-919	407/857-9195			
	Daytime T	Daytime Telephone Number			

with a series

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## Articles of Incorporation

96 NOV 20 PM 1: 19

1. The name of the corporation shall be: Grazi's Pastry Cafe, Inc.
2. The principal place of business and mailing address of the corporation is:
501 First Street, Orlando, FL 32824
3. The corporation shall have the authority to issue 1000 8 \$1 shares of stock.
4. The registered agent of the corporation is Graziella Spenger-Hediger and the registered street address is 501 First Street, Orlando, FL 32824  Florida 32824
5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: Graziella Spenger-Hediger  501 First Street, Orlando, FL 32824
The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.
6. The incorporator of this corporation is <u>Graziella Spenger-Hediger</u> whose street address is <u>501 First Street</u> , Orlando, FL 32824
Dated 11/15/96  Incorporator
laving been named as registered agent and to accept somice of process for the standard

egistered 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 am familiar with and accept the obligations of my position as registered agent.

Dated 11/15/96

SHARON D SOMNER
My Commission CC313827

Explica Sep. 19 197 Expires Sep. 06, 1997 Bonded by HAI 800-122-1555