

TRANSMITTAL LETTER

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

900002009829--0
-11/20/96--01076--012
****131.25 ****131.25

SUBJECT: Grazi's Pastry Cafe, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Please return the photocopy to me with the filing date stamped on it.

FROM: Graziella Spenger-Hediger
Name (printed or typed)
501 First Street
Address
Orlando, FL 32824
City, State & Zip
407/857-9195
Daytime Telephone Number

96 NOV 20 PM 4:19

AL NOV 25 1996

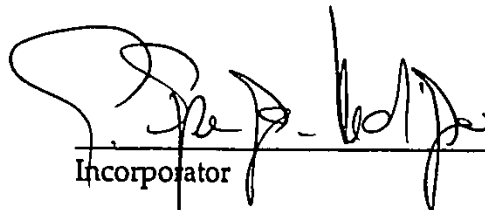
Articles of Incorporation

FILED

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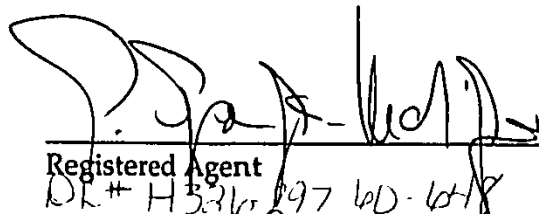
1. The name of the corporation shall be: Grazi's Pastry Cafe, Inc.
 2. The principal place of business and mailing address of the corporation is:
501 First Street, Orlando, FL 32824
 3. The corporation shall have the authority to issue 1000 @ \$1 shares of stock.
 4. The registered agent of the corporation 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 Graziella Spenger-Hediger whose street address is 501 First Street, Orlando, FL 32824

Dated 11/15/96


Incorporator

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 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


Registered Agent
DL # H536297 WD-618



SHARON D SOMNER
My Commission CC313827
Expires Sep. 00, 1997
Bonded by HAI
800-422-1885

Sharon D. Somner exp. 9-8-97
11/15/96