

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

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 \$ _____

FILED
96 DEC -9 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W26-25668

505

AL DEC - 9 1996

REQUEST TAKEN CONFIRMED APPROVED
DATE _____
TIME _____ CK No. _____
BY Jan _____

WALK-IN 12/16/96
Will Pick Up _____

RE. El Langostino Seafood Restaurant

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input checked="" type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> () Cert. Copy(s) <u>photo</u>		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservallon		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ()		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () pgs.		
SUBTOTALS		

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 6, 1996

CAPITAL CONNECTION
P O BOX 10349
TALLAHASSEE, FL 32302

SUBJECT: EL LANGOSTINO SEAFOOD RESTAURANT
Ref. Number: W96000025668

We have received your document for EL LANGOSTINO SEAFOOD RESTAURANT and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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

If you have any questions concerning the filing of your document, please call (904) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 696A00054861

Corrected

Jx!

RECEIVED
96 DEC -9 PM 1:11
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
OF
EL LANGOSTINO SEAFOOD RESTAURANT

FILED

96 DEC -9 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE UNDERSIGNED, acting as Incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

ARTICLE I

The name of the corporation is: EL LANGOSTINO SEAFOOD RESTAURANT INC.

ARTICLE II

This Corporation shall have perpetual existence.

ARTICLE III

This Corporation is organized for the purpose of transacting any and all lawful business for which corporation may be incorporated in the State of Florida.

ARTICLE IV

The Corporation is authorized to issue 100 shares at \$1.00 par value common stock.

ARTICLE V

The street address of the initial Registered Office of the Corporation is: 11238-40 SW 137 Avenue, Miami, Florida 33186, and the name of the Initial Registered Agent of the Corporation at that address is: MARLENE VALDES.
Principal address of the Corporation and Registered Office address are the same for all purposes.

ARTICLE VI

This Corporation shall have 1 director(s) initially. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the Corporation in the manner provided by law, but shall never be less than one. The names and address of the initial director(s) of this corporation are:

<u>NAME</u>	<u>ADDRESS</u>
MARLENE VALDES, President	11238-40 SW 137 Avenue Miami, Florida 33186

ARTICLE VII

The name(s) and address(es) of the Initial Officer(s) of the Corporation is/are:

<u>NAME</u>	<u>ADDRESS</u>
MARLENE VALDES, President	11238-40 SW 137 Avenue Miami, Florida 33186

ARTICLE VIII

The name(s) and address(es) of the Incorporator(s) signing these Articles of Incorporation is/are:

<u>NAME</u>	<u>ADDRESS</u>
MARLENE VALDES, President	11238-40 SW 137 Avenue Miami, Florida 33186

ARTICLE IX

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any

PAGE THREE OF FOUR

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 48.091 Florida Statutes, the following is submitted:

THAT EL LANGOSTINO SEAFOOD RESTAURANT INC.

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business in the City of Miami, County of Dade and State of Florida, has named MARLENE VALDES located at 11238-40 SW 137 Avenue, Miami, Florida 33186 as its agent to accept service of process within Florida.



INCORPORATOR, MARLENE VALDES

Dated: 11-21-96

HAVING BEEN NAMED to accept service of process for the above Corporation, at the place designated in this Certificate, I hereby agree to accept an 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.



REGISTERED AGENT
MARLENE VALDES

Dated: 11-21-96