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96 DEC 30 AM 9: 56

SECRETAL TATE
TALLAHASSEE, FLORIDA

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

	s Trattoria,			
(Pro	posed corporate n	ame - must include su	ffix)	
			80000 -12/ ***	020421089 /31/9601053017 **131.25 ****131.25
Enclosed is an original	and one (1) co	py of the articles o	f incorporation a	and a check
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	Filing Fee, Certified Copy & Certificate	
FROM:	Timothy Jon Name	Mitts (printed or typed)	-	
	7217 East	Colonial Dri	ve Ste 212	
	Orlando. Ci	F1 3280.7 ty, State & Zip		
	407-381- Daytime	-0330 Telephone number		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Stefano's Trattoria Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7217 East Colonial Drive Ste 212 Orlando, Fl 32807

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Two Hundred No Par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Timothy Jon Mitts
7217 East Colonial Drive Ste 212
Orlando, Fl 32807

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Timothy Jon Mitts
7217 East Colonial Drive Ste 212
Orlando, FL 32807

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
(An additional article must be added if an effective date is requested.)
A Signature
Signature
Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: Stefano's Trattoria Inc	1 SE 1
2.	The name and address of the registered agent and office is:	TAMASSEE
	Timothy Jon Mitts (NAME)	FLORIDA FLORIDA
	7217 East Colonial Drive Ste 212 (P.O. Box or Mail Drop Box NOT ACCEPTABLE)	·
	Orlando, Fl 32807 (CITY/STATE/ZIP)	

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

12 27 96 (SHOWATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314