P(SAMPLELETTER OF TRANSMITTALE) ZED

DATE February 17+47,7988780 PM 3:21

- PHONE

(305) 296-0330

Number

Area Code

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE TALLAHASSEE, FLORIDA

P.O. Box 6327 Tallahassee, FL 32314	
Re: COOKIES N'CONAME OF CO	PREMM
Gentlemen:	
Enclosed please find the original and one copy of the Acheck in the amount of \$122.50.	Articles of Incorporation, together with my
This represents the cost of the Filing Fees, Certified Co Registered Agent Designation for the above named con	
Very truly	Christine Clor man
	CHRISTINE KNOERL GLOSSMIN (Individual's Name)
27	MAILING ADDRESS OF CORPORATION 3:
	EV WSST FL 3304A

ARTICLES OF INCORPORATION

οf

FILED

		OI.	
	COOKIES	N' CREAM INC.	
***		(name of corporation)	97 FEB 20 PH 3: 2

The undersigned acting as the incorporators of a corporation under the Florida Business (Corporation Art, add to the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

COOKIES N' CREAM THE.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 500 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS

726 DU yal STREST

CITY KEY WEST FLORIDA ZIP 33040

Mailing address, if different

STREET ADDRESS 27 84 NORTH ROOSEVELT BLVD

CITY KEY WEST FLORIDA ZIP 33040

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME MICHAEL R.	GLOSSMUN	
ADDRESS 905 SOUTH	STREET	
CITY KEY WEST	FLORIDA	ZIP 33040
1		

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have TWC ither increased or diminished from time to tind ddresses of the initial director(s) of the corporation.	me by the By-Laws	, but shall never be less than one	(1). The names and
NAME CHRISTINE KNO	ERL GLOS	SMAN	-
ADDRESS 905 SOUTH S			
CITY KEY WEST		STATE FL.	ZIP 33040
NAME MICHAEL R. G			
ADDRESS 905 SOUTH STR			
CITY KEY WEST		STATE FL.	ZIP 33040
NAME /			
ADDRESS			
CITY		STATE	ZIP
	ARTICLE VIII - 11	NCORPORATORS	
The names and addresses of the incorporators			ws:
NAME CHRISTINE KNO			· · · · · · · · · · · · · · · · · · ·
ADDRESS 905 SOUTH S		77140119	
CITY KEY WEST	T-2.	STATE FLORIDA	ZIP33040
NAME	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP
The undersigned incorporator(s) have ex		cles of Incorporation this	1th
		husting Clon	man(Signature)
	- <u>/</u> L	year for your	(Signature)
			(Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

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sporejany of state Taekahassee. Florida

COOKIES N'CREAM INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

has named Michael R. Glossman

located at the aforesaid address, as its registered agent to accept service of process within this state.

905 SOUTH STREET KEY WEST FL. 33040

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.

(Sitpopure)

2-17-97 (Date)