## P97000041678

## TRANSMITTAL LETTER

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



THE CREAM CHEESE FACTORY, INCORPORATED SUBJECT: (Proposed corporate name - must include suffix) 300002169403---05/07/97--01058--009 \*\*\*\*\*78.75 \*\*\*\*\*78.75

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

\$70.00 Filing Fee & Certificate

**\$122.50** Filing Fee

& Certified Copy

\$131.25

Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

| FROM:   | LEONARD DOCTORS          |
|---------|--------------------------|
| ricolar | Name (Printed or typed)  |
|         | # 3113 Belden Suite #3   |
|         | Address                  |
|         | Jacksonville, FL 32207   |
| _       | City, State & Zip        |
|         | 904-399-3297             |
|         | Daytime Telephone number |

mal 1 2 1997.

## **ARTICLES OF INCORPORATION**

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

ARTICLE I NAME

The name of the corporation shall be:

## THE CREAM CHEESE FACTORY, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

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

3113 Belden Suite #3 Jacksonville, FL 32207

(904) 399-3297

ARTICLE\_III SHARES

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

1,000,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

LEONARD DOCTORS 3113 Belden Suite #3 Jacksonville, FL 32207

(904) 399-3297

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

LEONARD DOCTORS 3113 Belden Suite #3 Jacksonville, FL 32207

(904), 399-3297

Signature/Incorporator

5/5/97

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certivicate, 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 obliggations of my position as registered agent

Signature/Newstered Agent

5/5/97

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