1997<u>0000</u>53747

97 JUN 18 AM 11:21

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

Enclosed

TALLAHASSEE.FLORIDA 700002215767---4 -06/18/97--01062--003 ****122.50

SUBJECT: Semihale Bagel And Dell TIX

ed is an original a	nd one(1) copy of the articles	of incorporation and a c	heck for :	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		OPY REQUIRED TO		
FROM:	Semihale Bacel Name (Pr	Aud Doli inted or typed)	ON OF CONTON	RECEIVED
_	1427 W. TEA	JN 8T ddress		AHII: 08
_	TALLAHASSEE City,	Florida 7	12304	
224-1752				
	Daytime Te	elephone number	Off	11/9 36X

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

FILED

ARTICLES OF INCORPORATION

97 JUN 18 AH 11: 21

The undersigned incorporator, for the purpose of forming a corporation under the Florida LUNC INCOME. STALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA ARTICLE I The name of the corporation shall be: Semilole Bagel and Deli INC. ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: ω TEWN. ST TALLAHASSEE, Florida 32304 The number of shares of stock that this corporation is authorized to have outstanding at any one time is: INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Guerrieri MAdewood The name and address of the incorporator to these Articles of Incorporation are: Frawk Covernieri 920 Madeward Or. TALL FL 32303

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date