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FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC PROCESSING MENU

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TOI DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC. CONTACT: LIDIA FERNANDEZ ACCT#: 071001002335

PHONE: (305)599-0839

FAX #: (305)716-0346

NAME: GABLES PIZZA, INC.

AUDIT NUMBER..... H97000010932

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...1

PAGES..... 3 DEL.METHOD.. FAX

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** ENTER 'M' FOR MENU. **

JUL 3 1997

ARTICLES OF INCORPORATION OF

GABLES PIZZA, INC.

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

ARTICLE I NAME

The name of the corporation shall be: GABLES PIZZA, INC.

The principal place of business of this corporation shall be 15597 SW 111th TERRACE MIAMI, FLORIDA 33196

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

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

300 shares at \$1.00 par value.

ARTICLE IV TERM OF EXISTENCE This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are): DIANA DEREGON

15597 SW 111th TERRACE MIAMI, FLORIDA 33196

PREPARED BY: DIANA OBREGON
15597 SW 111th TERRACE
MIAMI, FLORIDA 33196
(305) 387-4411

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

DIANA OBREGON 15597 SW 111th TERRACE, MIAMI, FLORIDA 33196

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of incorporation this <u>1st</u> day of <u>JULY</u> 1997.

Signature(s) of Incorporator(s

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:
GABLES PIZZA, INC.
2. The name and address of the registered agent and office is:
DI ANA OBREGON 15597 SW 111th TERRACE
(P.O. BOX NOT ACCEPTABLE)
MIAMI, FLORIDA 33196
(CITY/STATE/ZIP)
SIGNATURE
TITLE PRESIDENT
DATE07/01/97
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO 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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES. SIGNATURE
DATE