## <sup>1</sup> David Torchin, C.P.A., P.A.

Certified Public Accountant

8211 West Broward Boulevard, Suite 200 Plantation, Florida 33324 a professional association

phone: (954) 472-3124 facsimile: (954) 472-0067

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Colonial Eateries, Inc.

Dear Sir/Madam;

200002237612--1 -07/14/37--01154--010 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

Enclosed please find a check made to the Secretary of State for \$78.75 for filing of the enclosed articles of incorporation and a certificate of status. Please return them to the following address as soon as possible. Thank You.

David Torchin, C.P.A., P.A. 8211 West Broward Blvd. Suite 200 Plantation, FL 33324-2726

SECRETARY OF STATE DIVISION OF CORPORATIONS

Very Truly Yours,

David Torchin, C.P.A.

# ARTICLES OF INCORPORATION OF

DIVISION OF CORPORATIONS

97 JUL 14, PM 12: 08

#### Colonial Eateries, Inc.

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:

Colonial Eateries, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

857 N.W. 81<sup>st</sup> Way Plantation, FL 33324 (954) 424-9890

### ARTICLE III CAPITAL STOCK

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

One Thousand Shares (1000.) at One Dollar (\$1.00) par value per share.

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jacob Cohen 857 N.W. 81<sup>st</sup> Way Plantation, FL 33324

## ARTICLE V INCORPORATOR(S)

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

President/Director Jacob Cohen 857 N.W. 81st Way Plantation, FL 33324

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

\_\_\_\_\_\_ day of \_July\_\_, 19 97\_\_.

Signature

Signature

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE



Pursuant to the provisions of sections 607.0501 or 617.0501, 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: Colonial Enteries, Inc.
2. The name and address of the registered agent and office is:
Jacob Cohen
(NAME)
857 N.W. 81 <sup>st</sup> Way
(P.O. BOX NOT ACCEPTABLE)
Plantation, FL 33324 (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.

SIGNATURE \_\_\_\_\_