P970009915

FILED

97 NOV -3 M IO: 32

Department of State

Division of Corporations

P. O. Box 6327

SECRETARY OF STATE TALLAHASSEE, FLORIDA

A DIVISION OF CORPORATION TALLAHASSEE, FLORIDA

Tallahassee, FL 32314

400002335854--8 -11/03/97--01021--025 *****70.00 ******70.00

William's Restaurant Enclosed is an original and one (1) copy of the articles of incorporation and a check for : \$78.75 □\$122.50 \$131.25 \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certified Copy Certified Copy & Certificate & Certificate ADDITIONAL COPY REQUIRED 441-B Grace Arenue
Address 850-235-1056 Daytime Telephone number 40V - 3 1997 P Hall

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

ARTICLES OF INCORPORATION

FILED 97 NOV -3 AM 10: 32 SECRETARY OF STATE

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

Ł

The name of the corporation shall be:

William's Restaurant Concepts, Incorporated

ARTICLE II PRINCIPAL OFFICE

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

441-B Grace Avenue Panama City, Florida 32401

<u>ARTICLE III SHARES</u>

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

50,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Bob Wilson - 441B Grace Avenue Panama City, Florida 32401

ARTICLE V INCORPORATOR

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

ia.-Bob Wilson 2109 Joan Avenue Panama City Beach, Florida 32408 is.-Scott Mixon BIZ Bradley Circle Lynn Aaven, Florida 32444

Sh O

Signature/Incorporator

Date

(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