P97000 101294 (AMPLE LETTER OF TRANSMITTAL)

DATE

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

900002358009--6 -11/26/97--01082--002 ****122.50 ****122.50

Re: Name of Corporation), Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

FILED 97 NOV 26 AN 10: 26 SECULITATION SEE, FLORIDA

ON-A-Roll-Cafe Inc
(Name of Corporation)

MAILING ADDRESS OF CO	ORPORATION —
12799 West For	rest Hill Blud
Wellington FL.	33414
PHONE	
(561) 793-245/6 Area Code Number	Ext.

ne 12/2/97

ARTICLES OF INCORPORATION

(name of corporation)
The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:
The name of the corporation is: ARTICLE I - CORPORATE NAME To see the corporation is:
ON A Roll Cafe JINC
ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law.
ARTICLE III - PURPOSE
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.
ARTICLE IV - CAPITAL STOCK
The corporation is authorized to issue 500 shares of common stock, par value \$ 100 per share.
ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is:
STREET ADDRESS
12799 West Forrest Hill Bluc
CITY Wellington FLORIDA ZIP 33414
Mailing address, if different
STREET ADDRESS Same
CITY FLORIDA ZIP
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT
The street address of the initial registered office and the name of the initial registered agent at the office is:
NAME Arrold Braman
ADDRESS 12799 west forcest Hill Blvd
CITY Wellington - FLORIDA - ZIP 33414

ADDICTOR	T 777	YN TEETT A T	DOIDD	AE DID	277777
ARTICLE	VII -	INIIIAL	BUARD	אונג אונ	ECTORS

This corporation shall have 100 (ither increased or diminished from time to time by the B	y-Laws, but shall never be le	ally. The number of directors may be seen than one (1). The names and
ddresses of the initial director(s) of the corporation are a	s follows:	
NAME Arnold Braman	- A	. '28. F
ADDRESS 1237 Summerican	Cir	
city wellington	STATE FL	zip 33414
NAME Clark Fernimore	· · · · · · · · · · · · · · · · · · ·	
ADDRESS 232 Summerinoad	SC.	
CITY Wellington	STATE F	ZIP 334(4
NAME	•	
ADDRESS		
CITY	STATE	ZIP
ARTICLE V	III - INCORPORATORS	•
he names and addresses of the incorporators signing the	se Articles of Incorporation a	re as follows:
NAME Sayon	-	
ADDRESS	·	
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS	-	
CITY	STATE	ZIP
he undersigned incorporator(s) have executed these	Articles of Incorporation	this 25 th
ay of November	, 19 <u>97</u> .	=
	and Br	(Signature) (Signature)
	<u> </u>	(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

(name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation at 12799 West Forcest Hill Blvd
has named Arnold Braman
located at the aforesaid address, as its registered agent to accept service of process within this
NOV 26 AM ID: 27 AND 27 AND 27
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 regis-
tered 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.