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

-11/03/97--01088--020

(Proposed corporate name - must include suffix)

	ed is an original and one (1) copy of the articles of incorporation and a check							
for:	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	SECH TALLA	98448		
	FROM:	Name HEROL	Name (printed or typed) 10824 Hwy 92, EAST Address					
		(0.0) 05	FL 3367 Ty, State & Zip 8 - 4634 Telephone number 9 SERVICE - 8			-		
		•						

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 4, 1997

BONNIE S. MATHEWS 10824 HWY 92 E TAMPA, FL 33610

SUBJECT: PAESANO'S TALIAN RESTAURANT, INC.

Ref. Number: W97000025068

We have received your document for PAESANO'S ITALIAN RESTAURANT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6926.

Tracy Meyer Document Specialist

Letter Number: 097A00053434

ARTICLES OF INCORPORATION

98 MAR 16 AM ID: 27 SECRETARY OF STATE OF STATE

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:

PAESANO'S ITALIAN RESTAURANT, INC

ARTICLE II PRINCIPAL OFFICE

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

10824 HWY 92, EAST TAMPA FL 33610

ARTICLE III SHARES

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

1000 shares at \$100 (ONE DOLLOS) PAR VALLE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BONNIE S. MATHEWS 10824 HWY92, EAST TAMPA FL 33610

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es)	of the incorporator(s) to these Articles o	f Incorpora-
tion is(are):		

Bonnie & Mathews 10824 Hwy 92, EAST TAMPA FL 33610

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

29 day of OCT , 1997.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: PAESANOIS TTALIAN RESTAU	RANT, THE	2.
2.	The name and address of the registered agent and office is: Bornio & Mothous	98 Jac	٠.
	(Name)	L CRET	
	10824 HWY 92, EAST	AR ASS	
	(P.O. Box or Mail Drop Box NOT acceptable)		
	TAM/4 FL 336/0	AHIO: 2	- G
	(City/State/Zip)	ZTE ATE	+ 5

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.

Bonnie Mathews 10-29-97
(Signature) (Date)