(Proposed corporate name - must include suffix)

CAFE AVALON, INCORPORATE

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

SUBJECT:

500002452375---4 -04/08/98--01048--002 \*\*\*\*122.50 \*\*\*\*122.50

\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	₹\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FROM:	FRANCES GLAUBMAN Name (Printed or typed)		TALL!	98
	6601 LYONS ROAD, SUITE C-12 Address		ARTARY E	APR-8 P
	COCONUT CREEK, FLORIDA 33073  City, State & Zip			PH12: 46
	(954) 420-0882			

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

#### ARTICLES OF INCORPORATION

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

The name of the corporation shall be:

CAFE AVALON, INC.



#### ARTICLE II PRINCIPAL OFFICE

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

6601 LYONS ROAD SUITE C-12 COCONUT CREEK, FLORIDA 33073

## ARTICLE III SHARES

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

100,000,000

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

HERBERT GLAUBMAN
6601 LYONS ROAD
SUITE C-12 , COCONUT CREEK, FLORIDA 33073

#### ARTICLE V INCORPORATOR

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

FRANCES GLAUBMAN
6601 LYONS ROAD
SUITE C-12
COCONUT CREEK, FLORIDA 33073

Signature/Incorporator

4-7-98

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

4-7-98

Date