Department of Division of Constrations P.O. Box 632 Tallahassee, 1 323

•	•			
SUBJECT:	Jon's Tropical Cafe, Inc.			
(Proposed corporate name - must include suffix)				
ň		:	3000002490;	1438
			-04/16/980 ****157.50	******78.75
Enclosed 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	\$131.25 Filing Fee, Certified Copy & Certificate Copy APR	₩
		ADDITIONAL CO	PY REQUIRED 5	
FROM: _	Jonathan R. Golding, Name (Pri	PM 4: 41 OF STATE E. FLORIDA	g '	
	4628 Autumn Woods Way			
Address				
,	Tallahassee, FL 32303			
Tallahassee, FL 32303 City, State & Zip				
850–562–6297				
	Daytime Te	lephone number	## # 25 \L -C	RECEIVED
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:

Jon's Tropical Cafe, Inc.

98 APR 15 PH 4: 41
SECRETARY OF STARE

ARTICLE II PRINCIPAL OFFICE

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

4628 Autumn Woods Way Tallahassee, FL 32303

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jonathan R. Golding, Jr. 4628 Autumn Woods Way Tallahassee, FL 32303

ARTICLE V INCORPORATOR

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

Jonathan R. Golding, Sr., Pres.

Golding & Sons, Inc. 311 Malabar St.

Lehigh/Acres, FL 33972

(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 agreeistered agent

Signature/Registered Agent

Date