P98 000037745

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

Tallahassee, FL 32314			SEE, FLORIDA
SUBJECT:	PASTA: (Proposed corp	BILITIES INC. orate name - must include su	ffix)
		V	000024997 -04/24/9801! ******78.75
Enclosed is an original a	and one(1) copy of the article	es of incorporation and a	check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate PY REQUIRED
FROM: PASTABILITIES Name (Printed or typed)			
210 S. FEDELAL HWY Address			
<u></u> .	BOCA RATON FL.	33 432 , State & Zip	·

APR 2 7 1998

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

(56/) 4/7 - 3/82 Daytime Telephone number

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:

PASTABILITIES, INC.

98 APR 24 PH 12: 44
SCURETARY OF STAIL
SCURETARY OF FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

210 S. FEDERAL HWY, BOCA KATON, FL 33432

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LORI DILICAN 210 S. FODERAL HWY. BOCA RATUN, FL 33432

ARTICLE V INCORPORATOR

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

LORI DILICAN 210 5 FEDERAL HWY BOXA- RATON, FL 33432

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 Pregistered agent

Signature/Registered Agent

Nate