

TRANSMITTAL LETTER

P 98000066793

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

900002599179--6  
-07/27/98-01055-012  
\*\*\*\*131.25

SUBJECT: Backstreet DELI INC.  
(Proposed corporate name - must include suffix)

FILED  
98 JUL 27 AM 7:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

ADDITIONAL COPY REQUIRED

FROM: JOHN McCaffery  
Name (Printed or typed)

2700 VANDIVER DR. Apt. 15D  
Address

WDB FL. 33409  
City, State & Zip

561-743-3330  
Daytime Telephone number

F. CHESSEB JUL 30 1998

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:

BACK STREET DELI INC.

### ARTICLE II PRINCIPAL OFFICE

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

2700 Van Diver Dr. Apt. 15D  
WPB FL 33409

### 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:

JOHN McCaffery 2700 Van Diver Dr. Apt. 15D  
WPB FL 33409

### ARTICLE V INCORPORATOR

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

JOHN McCaffery 2700 Van Diver Dr. Apt. 15D  
WPB FL 33409

  
Signature/Incorporator

7-23-98  
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

7-23-98  
Date

FILED  
98 JUL 27 AM 7:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA