TRANSMITTAL LETTER

8 000 0 732 15

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : E \$78.75 \$70.00 □\$122.50 **S**131.25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy

Certified Copy & Certificate ADDITIONAL COPY REQUIRED

Barbara Till Black
Name (Printed or typed) 6223 PASADENSA PT., BWO. Jouth CULFPORT FLORIDA 33701 873 - 898 - 4700 Daytime Telephone number

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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:
The name of the corporation shall be: QUIZNOS - Winter Park Terrace, TWISSE 30
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 6223 PASADENA PT. BLD. South
GULFORT FLORIDA 33707
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
60,000
•
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
6273 PASANSOTA PO DIO TOLAS
GULFFORT, FLORIDA 33757
33 757
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
Barbara Jili Black 6223 PASADENA POINT BLVD. South
GULFFORS, R. 33707
Signature/Incorporator Britany Str B. 10. 98
Signature/Incorporator Date

75 88

(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