TRANSMITTAL LETTER

P98000073268

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

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SUBJECT: COL	OSIMO'S TTALE (Proposed corpor	IAN EATERY rate name - must include su	TNC,
Enclosed is an original ar	nd one(1) copy of the articles	s 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 CO	PY REQUIRED
FROM:	KENNETH Name (Pr	Ohn Colosimo inted or typed)	<u> </u>
	7900 NW 24	TH ST.	——————————————————————————————————————
	MARBATE, FIC	orida, 3306 State & Zip	SECRETARY OF LAHASSEE.

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

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:

COLOSIMO'S ITALIAN FATERY INC.

ARTICLE II PRINCIPAL OFFICE

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

10101 W. OAKLAND PK Blud. SUNRISE, FLORIDA 33351

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: KENNETH JOHN COLOSIMO 7900 NW 24 STREET MARGATE, Florida 33063

ARTICLE V INCORPORATOR

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

Kenneth John Colosimo 7900 NW 24TH STREET Margare, Florida 33063 Paula Mane Colosimo 7900 NW 24TH STREET MARGATE, Florida 33063

Kenneth John (olania Signature/Incorporator

8-17-98 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

8-17-98

Date