

P98000080405

Peter Makris  
2110 Drew Street  
Clearwater, FL 33765

September 4, 1998

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-09/14/98--01050--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

Gentlemen:

I am enclosing the Articles of Incorporation and the Certificate Designating Registered Agent/Registered Office for Grandma Sallys Restaurant II, Inc. Also enclosed are the applicable fees for the Department of State. Please file the Articles of Incorporation and return the articles back to the address below:

Peter Makris  
2110 Drew Street  
Clearwater, FL 33765

If there are any questions, or you are having problems filing the Articles, please call me at (813) 446-0000.

Very truly yours,



Peter Makris

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 SEP 14 AM 9:17

SEP 17 1998

**ARTICLES OF INCORPORATION**

**OF**

**GRANDMA SALLYS II, INC.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Corporation.

**ARTICLE I. NAME**

The name of the corporation shall be:

**GRANDMA SALLYS II, INC.**

The principal place of business of this corporation shall be:

4801 Rowan Road, Apt. 115, New Port Richey, Florida 34653. The mailing address of this corporation shall be: 4801 Rowan Road, Apt. 115, New Port Richey, Florida 34653.

**ARTICLE II. NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III. CAPITAL STOCK**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock have \$1.00 per value share.

**ARTICLE IV. TERM OF EXISTENCE**

The corporation is to exist perpetually.

**ARTICLE V. OFFICERS DIRECTORS**

This corporation is to have **two directors and officers**, initially. The names and addresses of the initial directors and officers who shall hold office for the first year of the corporation's existence, or until their successors are elected or appointed are:

**Fotis Kontis**  
**President**

**4801 Rowan Road Apt. 115**  
**New Port Richey, FL 34653**

**Pericles Vassilakopoulos**  
**Secretary**

**4801 Rowan Road Apt. 115**  
**New Port Richey, FL 34653**

**ARTICLE VI. INCORPORATOR**

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

**Fotis Kontis**

**4801 Rowan Road Apt. 115**  
**New Port Richey, FL 34653**

IN WITNESS WHEREOF, the undersigned incorporator has executed these  
Articles of Incorporation this 8<sup>th</sup> day of SEPTEMBER  
1998.

Signature of Incorporator

  
Incorporator

STATE OF FLORIDA

COUNTY OF PASCO

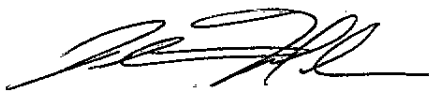
THE FOREGOING instrument was acknowledged and sworn to before me

this 8<sup>th</sup> day of SEPTEMBER, 1998, FOTIS KONTIS of

GRANDMA SALLYS RESTAURANT II, INC.

Notary Public



  
My Commission Expires: \_\_\_\_\_

**CERTIFICATE DESIGNATING**  
**REGISTERED AGENT/REGISTERED OFFICE**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

**GRANDMA SALLYS RESTAURANT II, INC.**

2. The name and address of the registered agent and office is:

Name: **FOTIS KONTIS**

Address: **4801 ROWAN ROAD, APT. 115**

City: **NEW PORT RICHEY**

State: **Florida**

Zip: **34653**

SIGNATURE \_\_\_\_\_

(Corporate Officer)

TITLE: \_\_\_\_\_ **PRESIDENT**

DATE: \_\_\_\_\_ **9/8/98**

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_ **9/8/98**