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

600002662556---0 600002662556---0 10/13/88--01047--003 ****122.50 ******78.75

TO TO CO.	Alfi's Cafe & Grill, Inc.				
UBJECT: _	(Proposed corporate name - must include suffix)				
Enclosed is an o	riginal and	one(1) copy of the article	es of incorporation and a	check for:	
☐ \$70.0 Filing Fe	0	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
			ADDITIONAL CO	PY REQUIRED	
		Alfi's Cafe & Grill			
FR	ROM:	M:Name (Printed or typed)			
		150 Lancer O	9. VIQ		
			SECRE IVISION		
		Apopka, Florida 32712			N OF CO
	·	City, State & Zip			3 3 3 3 3 3 3 3 3 3
		(407) 889-9552			FILED STATE OF CORPORATION
		Daytime Telephone number			S HS

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:

Alfi's Cafe & Grill, Inc.

ARTICLE II PRINCIPAL OFFICE

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

150 Lancer Oak Dr., Apopka, Florida 32712

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Ann M. Markert, 150 Lancer Oak Dr., Apopka, Florida 32712

ARTICLE V INCORPORATOR

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

Ann M. Markert, 150 Lancer Oak Dr., Apopka, Florida 32712

Signature/Incorporator

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(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

Date