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 City/State/Zip	Phone #	

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

□ Walk in □ Mail out	Pick up time Will wait	Photocopy	Certified Copy Certificate of Status	99 8
4	(Corporation Name)	(Doct	iment#)	<u></u>
3	(Corporation Name)	(Doct	ıment #)	 ,
2	(Corporation Name)	(Doct	ument #)	
1	(Corporation Name)	(Doct	ment #)	

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS.
Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
:	Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

SECRETARY OF STATENS
DIVISION OF CORPORATIONS
99 APR -5 MILL: 49

Examiner's Initials

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:

FMM Restaurant, Inc.

ARTICLE II PRINCIPAL OFFICE

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

c/o Savior Management, Inc. 10026 Spanish Isles Blvd. Bay 16/17 Boca Raton, FL 33498

ARTICLE III SHARES

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

One Hundred Thousand (100,000) shares at \$.01 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Linda J. Walden, CPA Walden & Associates, CPA, PA 11849 Sunchase Court Boca Raton, FL 33498



ARTICLE V INCORPORATOR

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

Margaret Giordano

c/o Savior Management, Inc.

10026 Spanish Isles Blvd. Bay 16/17

Boca Raton, FL 33498

Signature Incorporator

Date

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

SECRETARY OF STATENS
DIVISION OF CORPORATIONS
ON ADR -5 AMII: 49