TRANSMITTAL LETTER

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

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-07/15/99--01025--012
*****87.50   *****87.50

SUBJECT: _PastaBella, Inc._
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ $70.00 Filing Fee	☐ $78.75 Filing Fee & Certificate of Status	☐ $78.75 Filing Fee & Certified Copy	☒ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: _Janine H. Altobelli_
Name (Printed or typed)

123 - 120th Avenue
Address

Treasure Island, FL 33706
City, State & Zip

_727 - 363 - 3450_
Daytime Telephone number

FILED
99 JUL 15 PM 3: 02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

D BROWN   JUL 2 2 1999

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   The name of the proposed corporation shall be PastaBella, Inc.

Article II   The principle place of business and mailing address shall be 123 - 120th Avenue, Treasure Island, FL 33706.

Article III The number of shares of stock that this corporation is authorized to have outstanding at any one time is one million (1,000,000).

Article IV   The name and Florida address of the initial registered agent are: Frank Robert Altobelli, residing at 123 - 120th Avenue, Treasure Island, FL 33706.

Article V   The name and Florida address of the incorporator to these Articles of Incorporation are: Janine Hope Altobelli, residing at 123 - 120th Avenue, Treasure Island, FL 33706.

_____   _7-12-99_____
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

_____   _7-12-99_____
Signature/Registered Agent   Date