

P99000069381

TRANSMITTAL LETTER

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

SUBJECT: MPG PUBLIX FIDDLESTIX, 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

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-07/30/99--01051--008
*****70.00 *****70.00

ADDITIONAL COPY REQUIRED

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

FROM: Louanne S. Love
NAME
28050 U.S. Hwy 19 N., Suite 205
ADDRESS
Clearwater, FL 33761
CITY, STATE & ZIP
(727) 723-2872
DAYTIME TELEPHONE NUMBER

99 JUL 30 AM 8:29
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: MPG PUBLIX FIDDLESTIX, INC.

ARTICLE II: PRINCIPAL OFFICE

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

28050 U.S. Hwy. 19 N., Suite 205, Clearwater, Florida 33761

ARTICLE III: SHARES

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

100

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

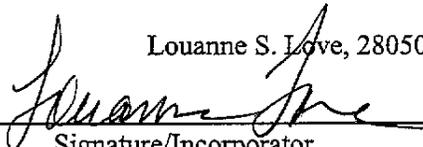
The name and Florida street address of the initial registered agent are:

Louanne S. Love, 28050 U.S. Hwy 19 N., Suite 205, Clearwater, FL 33761

ARTICLE V: INCORPORATOR

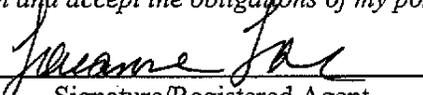
The name and address of the incorporator to these Articles of Incorporation are:

Louanne S. Love, 28050 U.S. Hwy 19 N., Suite 205, Clearwater, FL 33761

 7-27-99
Signature/Incorporator 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.

 7-27-99
Signature/Registered Agent Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA