PACONIA STRICE 37

BISMILLAH RESTAURANT, INC.

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

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Enclosed is an original and one(1) or	ppy of the articles	of incorporation and a c	check for :	7
S70.00 Significant		□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: MOHAMMA	D SHAHZAD		\$-\$HT	2.
	Name (Pr	inted or typed)		
211 N.	E. 97th St.,	#204		
	A	ddress	SI SI)
Miami_S		3138	99 SEP SECRLTI	
	City,	State & Zip	29 V\$8E	•
305 9	2/9 - 8/8 V Daytime To	elephone number	AH 9: 45 OF STATE E. FLORID	

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.

99 SEP 29 AM 9: 45
SECRE LARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BISMILLAH RESTAURANT, INC. ;

ARTICLE II PRINCIPAL OFFICE

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

16606 N. Miami Avenue Miami, Fl 33169

ARTICLE III SHARES

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

ONE HUNDRED SHARES (100) AT ONE DOLLAR (\$1.00) PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MOHAMMAD SHAHZAD , 16606 N. Miami Ave. Miami, Fl 33169

ARTICLE V INCORPORATOR

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

MOHAMMAD SHAHZAD 16606 N. Miami Ave Miami, Fl 33169 ZAFAR SULTAN 16606 N. Miami Ave. Miami, Fl 33169

Signature/Incorporator

3/2//33

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

Signature/Registered Agent

9/27/99 **Date**