TRANSMITTAL LETTER

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Department of State Division P.O. Bo **Tallahas**

Division of Corporati	ions	=		
P. O. Box 6327		-	30000303	376039
Tallahassee, FL 323	14		-11/08/99	}NINI8ñña_~
SUBJECT:	BOYNTON Pi22K (Proposed corpor	ate name - must include suff	*******	50 SECHETARY OF STATE
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	check for:	最高 8
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM	: DANIEL TRACY D) MON rinted or typed)		
	1047 SW25THWA	Address		* rue
	BOYNTON BEACH FL	: 37426 State & Zip		-

NOV 1 0 1999 E CHARGE

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

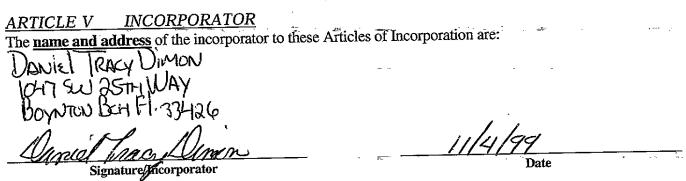
ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1 NAME	2 - D' - D (SARAN)
The name of the corporation shall be:	BOYNTON Pizza COMPANY
	,

ARTICLE II	PRINCIPAL OFF	<u>ICE</u>	in the second se	TALLA	ON 66	
The principal place	e of business and mail	ling address of this of	corporation shall be:	HAS	i	1
104 51	W 25TH WAY ON BEACH FL.	271+26-		留	<u>ග</u>	
DOYNI	ON DEALLY (1)	27/204		프	=	ب
ARTICLE III	SHARES				8;	
The number of sha	ares of stock that this	corporation is author	rized to have outstandir	ng at any one time is	:: 80	
1.	00 St 100			•		

ARTICLE IV	INITIAL REGISTERE	ED AGENT AND STREET ADDRESS
The name and Flo	rida street address of the init ANIEL TRACY DIMON	tial registered agent are: 1047 SW 25771 WAY BOYNTON BCH - 23426
		DOUNTON DOH - 224 AG



(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 pasition as registered agent

Signature/Registered Agent

Date