

P99000105238

LETTER OF TRANSMITTAL

NOVEMBER 29, 1999

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Fl. 32314

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-12/02/99--01072--008
*****78.75 *****78.75

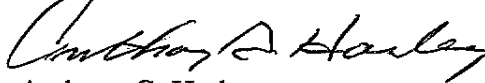
RE: Lotza Pizza, Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$ 78.75.

This represents the cost of the Filing fees, Certified Copy of Articles of Incorporation and the fee for Registered Agent designation for the above named corporation.

Very truly yours,



Anthony G. Harley
Lotza Pizza, Inc.

Mailing address of Corporation:

Lotza Pizza, Inc.
715 Oak Street
Inverness, Fl. 34452

FILED
1999 DEC -2 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1999 DEC -2 AM 11:50

of

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LOTZA PIZZA, INC.

THE UNDERSIGNED SUBSCRIBER(S) TO THESE ARTICLES OF INCORPORATION, NATURAL PERSON(S) COMPETENT TO CONTRACT, HEREBY FORM A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE I - CORPORATE NAME

THE NAME OF THE CORPORATION IS:

LOTZA PIZZA, INC.

ARTICLE II - DURATION

THIS CORPORATION SHALL EXIST PERPETUALLY UNLESS DISSOLVED ACCORDING TO FLORIDA LAW.

ARTICLE III - PURPOSE

THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN ANY ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE IV - CAPITAL STOCK

THE CORPORATION IS AUTHORIZED TO ISSUE ONE HUNDRED SHARES (100) OF ONE DOLLAR(S) (\$ 1.00) PAR VALUE COMMON STOCK, WHICH SHALL BE DESIGNATED "COMMON SHARES."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

THE PRINCIPAL OFFICE AND THE MAILING ADDRESS OF THE CORPORATION IS:

715 OAK STREET

INVERNESS FLORIDA 34452

THE NAME AND STREET ADDRESS OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION IS:

ANTHONY G HARLEY

715 OAK STREET INVERNESS FLORIDA 34452

ARTICLE VI - INITIAL BOARD OF DIRECTORS

THIS CORPORATION SHALL HAVE ONE (1) DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DIMINISHED FROM TIME TO TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS THAN ONE (1). THE NAMES AND ADDRESSES OF THE INITIAL DIRECTOR (S) OF THE CORPORATION ARE AS FOLLOWS:

ANTHONY G HARLEY

715 OAK STREET

INVERNESS FLORIDA 34452

ARTICLE VII - INCORPORATORS

THE NAMES AND ADDRESSES OF THE INCORPORATORS SIGNING THESE ARTICLES
OF INCORPORATION ARE AS FOLLOWS:

ANTHONY G HARLEY

715 OAK STREET

INVERNESS FLORIDA 34452

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER(S) HAVE EXECUTED THESE
ARTICLES OF INCORPORATION THIS 30th DAY OF November, 1999

Anthony G Harley

STATE OF FLORIDA)

COUNTY OF Citrus)

SS

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGMENTS IN THE STATE
AND COUNTY SET FORTH ABOVE, PERSONALLY APPEARED:

Kathy L. Teepele
SIGNATURE

H640007571490
FORM OF IDENTIFICATION

SIGNATURE

FORM OF IDENTIFICATION

SIGNATURE

FORM OF IDENTIFICATION

KNOWN TO ME AND KNOWN TO BE THE PERSON(S) WHO EXECUTED THE FOREGOING
ARTICLES OF INCORPORATION, WHO ACKNOWLEDGED BEFORE ME THAT _____
EXECUTED THESE ARTICLES OF INCORPORATION, THAT I RELIED UPON THE
FORM OF IDENTIFICATION OF THE ABOVE NAMED PERSON AS INDICATED
OPPOSITE EACH NAME, AND THAT AN OATH (WAS) (WAS NOT) TAKEN.

NOTARY RUBBER STAMP SEAL



WITNESS MY HAND AND OFFICIAL SEAL IN THE
COUNTY AND STATE LAST AFORESAID THIS
DAY OF 30th NOV, 1999

Kathy L. Teepele
NOTARY SIGNATURE

Kathy L. Teepele
PRINTED NOTARY SIGNATURE

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

1999 DEC -2 AM 11: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF REGISTERED AGENT

OF

LOTZA PIZZA, INC.

PURSUANT TO FLORIDA STATUTES SECTIONS 48.091 AND 607.0501, THE FOLLOWING
IS SUBMITTED:

THE ABOVE CORPORATION, DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE
OF FLORIDA WITH ITS REGISTERED OFFICE AS INDICATED IN THE ARTICLES OF
INCORPORATION.

AT 715 OAK STREET

INVERNESS FLORIDA 34452

HAS NAMED ANTHONY G HARLEY

LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT
SERVICE OF PROCESS WITHIN THIS STATE.

ACKNOWLEDGEMENT

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS
FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS
CERTIFICATE, AND BEING FAMILIAR WITH THE OBLIGATIONS OF THAT
POSITION, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO
COMPLY WITH THE PROVISIONS OF FLORIDA LAW IN KEEPING OPEN SAID
OFFICE.


REGISTERED AGENT