

TRANSMITTAL LETTER

P 02000112372

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

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-10/17/02--01031--020
*****87.50 *****87.50

SUBJECT: The Bikers Den Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Kathleen A. Pride
Name (Printed or typed)

9425 Blind Pass Rd #1303
Address

St. Pete Beach, Florida 33706
City, State & Zip

(727) 360-6078
Daytime Telephone number

RECEIVED BY STATE
TALLAHASSEE, FLORIDA

2002 OCT 17 AM 10:02

FILED

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

10-18-02
7

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

The Bikers Den Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

*The Bikers Den
5100 95th st. north #14
st. Petersburg, Florida 33708*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and ALL Lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

ONE.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

*Kathleen A. Pride - (President)
9425 Blind Pass Rd # 1303
st. Pete Beach, Florida 33706*

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

*Kathleen A. Pride
9425 Blind Pass Rd # 1303
st. Pete Beach, Florida 33706*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Kathleen A. Pride
9425 Blind Pass Rd # 1303
st. Pete Beach, Florida 33706*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Kathleen A. Pride

Signature/Registered Agent

10/15/02

Date

Kathleen A. Pride

Signature/Incorporator

10/15/02

Date

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2002 OCT 17 AM 10:02
SOS ILLINOIS STATE
TALLAHASSEE, FLORIDA