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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

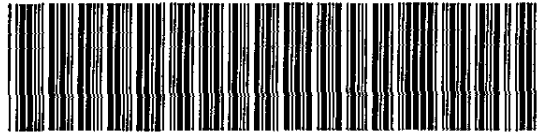
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

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2003 JUN 11 AM 8:13

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

SUBJECT: A Walk of Elegance, 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: SHERRI WADE
Name (Printed or typed)

3880 PineLog Road
Address

Chipley FL 32428
City, State & Zip

850 638 2336
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

A Walk of Elegance, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

*1310 North Railroad Avenue
Chipley, Florida 32420*

mailing address: PO BOX 855

Chipley Florida 32420

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any legal and lawful purpose

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares @ a par value of \$1.00 each.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

*SHERRI P. WADE - P, VP, T, S
3880 Pine Log Road
Chipley, Florida 32428*

ARTICLE VI REGISTERED AGENT

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

*SHERRI P. WADE
3880 Pine Log Road
Chipley, Florida 32428*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*SHERRI P. WADE
3880 Pine Log Road
Chipley, Florida 32428*

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

Sherri P. Wade

Signature/Registered Agent

5/29/03

Date

Sherri P. Wade

Signature/Incorporator

5/29/03

Date