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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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100 / 100 /

TRANSMITTAL LETTER

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

FROM:

	CHUCK'S BLUES INC.	
SUBJECT:		
	(Proposed corporate name- must include suffix)	
	(1 toposed corporate name mass metado summ)	

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

__\$70.00 _X_\$78.75
Filing Fee & Certificate of Status

CHUCK'S BLUES INC.

Name (Printed or typed)
P O BOX 1000

Address
DURANT, FL 33530

City, State & Zip
813 737-3606

Daytime Telephone Number

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

2004

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 I NAME

The name of the corporation shall be: CHUCK'S BLUES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall the state of the s

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding

at any one time is: 100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: CHARLES R GENRICH, 5521 RAINFROG LN, PLANT CITY, FL 33567 MAILING ADDRESS P O BOX 1000, DURANT, FL 33530

ARTICLE V INCORPORATOR

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

CHARLES R GENRICH, 5521 RAINFROG LN, PLANT CITY, FL 33567 MAILING ADDRESS P O BOX 1000, DURANT, FL 33530

Signature/Incorporator

Date

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 conplete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date