P04000154800

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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TRANSMITTAL LETTER

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

SUBJECT: <u>Ch</u>	CKEN DEJUXE (PROPOSED CORPORA	TAC. TENAME-MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Brandon Johnson		····
-	P.O. Box 621; Marianna, FI	32447 State & Zip	
u.	850-209-22 Daytime T	79 elephone number	<u> </u>

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



PECEIVED

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood Secretary of State November 8, 2004

BRANDON JOHNSON P.O. BOX 6215 MARIANNA, FL 32447

SUBJECT: CHICKEN DELUXE INC.

Ref. Number: W04000040877

We have received your document for CHICKEN DELUXE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a <u>signed statement</u> of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6924.

Letter Number: 804A00063768

Stacy Prather/Suzanne Hawken Document Specialist Supervisor New Filings Section

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:
Chicken Deluxe Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
2816 K Hwy 71 Marianna, FL 32446
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
To seperate the business From my personal property
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Brandon Johnson - P.O. Box 6215 Marianna, FL 32447 - Ceo
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Brandon Johnson 4437 Dorothy Dr. Apt 2 Mariama, FL 32446
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Brandon Johnson P.O. Box 6215
Masiana FL 30447 **********************************
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Signature/Registered Agent Date
Brandon Johnson 11-1-04 Signatura Ingormorator
Signapare/Incorporator Brandon Johnson