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TRANSMITTAL LETTER

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

SUBJECT: Unlimited Entree Inc.				
- •	(PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u>	IDE SUFFIX)	
Enclosed is 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Benfeld Name (Printed or typed)				
58 Sioux Circle				
Havang Kl 32333 City, State & Zip				
(850) 539- 577/ 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)	FILED
ARTICLE I NAME	05 FEB 23 PM 1: 20
The name of the corporation shall be:	
Unlimited Entree Inc.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3936 Fawn Hill TRail	•
Tallahassee F1 32312 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	·
Resturant	
ARTICLE IV SHARES The number of shares of stock is:	• •
•	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional The name(s), address(es) and title(s):	
Shandka Thompson 3236 Fawn Hill TRail	Tall, FI 3 03/2 - Preside
Leo Thompson "	11 - Vice Presid
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Ron Benfield 58 Soux Citale	
Havano, RI 32333	
ARTICLÉ VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Kon Burtield S& Sioux Circle	
Hauara ff 33333 ******************************	***********
Having been named as registered agent to accept service of process for the above sta certificate, I am familiar with and accept the appointment as registered agent and ag	neu corporation as the place aesignates in this
La de Dad	2/2/2
Signature/Registered Agent	Date
for Belle	2/21/05
Signature/Incorporator	Date