07000103493

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(City/State/Zip/Priorie #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



100106964401

09/19/07--01002--004

**157.50 07 SEP 18

PM 3: 30

D. WHITE SEP 18 2007

COVER LETTER

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

SUBJECT:	EXPLY DISED CORPOR	ATENAME - MUST INCLU	JDE SUFFIX)
Enclosed are an orig \$70.00 Filing Fee	inal and one (1) copy of the and \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status

FROM: JEAN CLAPK
Name (Printed or typed)

J63/ BUNN AVE

Address

Address

City, State & Zip

Pour Payrine 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) EXPRESS BISCOUNT DRY CHANTR INC. The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: JACKSOM: 1/E F/A 32218 **PURPOSE** The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BYSINESS ARTICLE IV SHARES The number of shares of stock is: 100 SHARES INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s) TARY ANDERSON 1687 D.V. REGISTERED AGENT ANDERSON JACKSONVILLE FLA 312/8 The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: 2681 BUNN AVE ACKSONVILLE F/A 322/8/ The name and address of the Incorporator is: 31 Dun AVE Ineksonville Fla 3218 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

Signature/Incorporator