Ponull 8593

(Re	equestor's Name)			
(Address)				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	*#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

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

SUBJECT:	GLACIAL BEVERAGE CORPORATION			
Enclosed are an orig	(PROPOSED CORPORA)			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO		
FROM:	RYAN GOULDING Name (Printed or typed) 155 REVERE DRIVE, SUITE 10 Address NORTHBROOK, IL 60062 City, State & Zip			
	847-291 Daytime T	1-4161 elephone 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)

ARTICLE I NAME

The name of the corporation shall be:

GLACIAL BEVERAGE CORPORATION

<u>ARTICLE II PRINCIPAL OFFICE</u>

The principal place of business/mailing address is:

1800 SECOND ST., SUITE 758 SARASOTA, FL 34236

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
THE TRANSACTION OF ANY OR ALL LAWFUL BUSINESS FOR WHICH
CORPORATIONS MAY BE INCORPORATED IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

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9/28/2007 Date