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COVER LETTER

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

SUBJECT: Elaine's	Sugar Butter Biscuit, Inc.		
Enclosed are an orig	inal and one (1) copy of the art	ATE NAME - MUST INC	
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Helen E. Riels Name	e (Printed or typed)	:
	P.O. Box 431	Address	
	Horseshoe, F Cir	L 32648 y, State & Zip	
	(352) 498-505 Daytime	50 Telephone number	

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



December 1, 2008

HELEN E RIELS P.O. BOX 431 HORSESHOE, FL 32648

SUBJECT: ELAINE'S SUGAR BUTTER BISCUIT, INC,

Ref. Number: W08000053574

We have received your document for ELAINE'S SUGAR BUTTER BISCUIT, INC, and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected 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) 245-6052.

Letter Number: 608A00058750

Paisley A Alford Clerk New Filing Section

Division of Comparations D.O. DOV 6997, Tallaharras Elevida 20014

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:

Elaine's Sugar Butter Biscuit, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal street address and mailing address, if different is:

Elaine's Sugar Butter Biscuit, Inc. 16148 SE Highway 19 Cross City, FL 32628

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation's principle business will be a full service restaurant and catering:

ARTICLE IV SHARES

The number of shares of stock is: 7,500 shares authorized, at \$1.00 Par

INITIAL OFFICERS AND/OR DIRECTORS

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

Helen E. Riels, President, Vice-President, Secretary and Treasurer P.O. Box 431 Horseshoe, FL 32648

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

Helen E. Riels 16148 SE Highway 19 Cross City, FL 32628

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Helen E. Riels P.O. Box 431 Horseshoe, FL 32648

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/Registered Agent