99700054000

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

Tallahassee, FL 323	314			
SUBJECT:	CHICKADEE'S	INC. ame – must include su		
	(Proposed Corporate in	iaino – musi include su	<i>^,</i>	
Enclosed is an original for:	inal and one (1) copy	of the articles of inco	rporation and a ch	eck
\$70.00 Filling Fee	X \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Cartificate	
Please return the p	photocopy to me with	the filing date stampe	ed og it -06/19/ *****78	217344—-3 9701087004 8.75 *****78.75
FRO		Camilla L. Seymour Name (printed or typed)		DIV:SE
	2004 Ca	2004 Cascades Dr. #7		SEGRETAR DIVISIONETAR
		Address		->2F
		Naples, FL. 34112		ED OF STATE OF STATE
	Cit	City, State & Zip		ATION 105
	941-793			ري د
	Davtime	Telephone Number		

S (379)

. Articles of Incorporation

1. The name of the corporation shall be:	CHICKADEE'S, INCSION TARY OF STATE 97 JUH 19 PH 1: 05 address of the corporation is:
2. The principal place of business and mailing	address of the corporation is:
2004 Cascades Dr. #7, Naples,	FL. 34112
3. The corporation shall have the authority to	issue shares of stock.
4. The registered agent of the corporation i registered street address is 2004 Cascad Florida 34112.	s Camilla L. Seymour and the es Dr. #7, Naples
5. The initial Board of Directors shall have 2 is/are as follows: Camilla L. Seymour, John R. Seymour,	member(s) whose name(s) and address(es) 7,2004 Cascades Dr.#7, Naples,FL34112 2004 Cascades Dr.#7, NaplesFL34112
The number of directors may be raised the corporation but shall in no case be less that	or lowered by amendment of the bylaws of n one.
6. The incorporator of this corporation is address is2004 Cascades Dr.#7,N	Camilla L. Seymour whose street Vaples, FL. 34112
Dated 6/1/97	Incorporator eymom

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated .