## TRANSMITTAL LETTER Department of State

Mother Clucker's Inc.

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

SUBJECT:	JECT: Mother Clucker's Inc. (Proposed corporate name - must include suffix)						
		(Proposed corpo		90000262!	-01084001		
Enclosed is an	original a	and one(1) copy of the articl	es of incorporation and a	check for:	1		
☐ \$70. Filing F		\$\frac{1}{2}\$78.75  Filing Fee  & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate			
	ADDITIONAL COPY REQU						
FROM: Thomas M. Bankhead  Name (Printed or typed)							
507 NW 19th Avenue							
	Gainesville, FL 32609 City, State & Zip						
	(352) 376 - 1144  Daytime Telephone number						
		·		STATE RATUM ORIDA	RECEIVED		

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

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation Act, hereby adopts the following Articles of		0
ARTICLE I NAME	•	98 NEE
The name of the corporation shall be:	. :	是點
Mother Cluck	er's Inc.	98 AUG 26
ARTICLE II PRINCIPAL OFFICE		A ON
The principal place of business and mailing address of this co	orporation shall be:	12. F
204 SW 2nd Are	nul	0 35
Gainesville FL 3		
ARTICLE III SHARES	2601	
The number of shares of stock that this corporation is author	ized to have outstanding at any one	time is:
One Thousand (10	<del>-</del> -	
ARTICLE IV INITIAL REGISTERED AGENT	AND STREET ADDRESS	
The name and Florida street address of the initial registered a		
Thomas M. Bankhead 507 NW 1944 Avenue	-	
Gainesville, FL 32609		
ARTICLE V INCORPORATOR  The name and address of the incompensate to these Articles	of Transmission and	
The <u>name and address</u> of the incorporator to these Articles	of incorporation are:	
Thomas M. Bankhend		
507 NW 19th Avenue Gainesville, FL 32609		
11) 1/1 / 5250 /	8/21/	90
Signature/incorporator	Date	10
(An additional article must be added if	an effective date is requested.)	
Having been named as registered agent and to accept service of proces this certificate, I hereby accept the appointment as registered agent and the provisions of all statutes relating to the proper and complete perforobligations of my position as registered agent	agree to act in this capacity. I further a	gree to comply with
-17 N	8/21/98	?
Signature/Registered Agent	Date	