TRANSMITTAL LETTER

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

100003050751--0 -11/22/93--01063--016 *****87.50 *****87.50

SUBJECT:	HAPPY DAYS FISHER (Proposed corpor	IES, INC. ate name - must include suffi	ix)		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:					
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
TDOM:	NICHOLAS R. DUR	ADDITIONAL CO	PY REQUIRED		
FROM:	Name (Printed or typed)				
	7218 DiPAOLA DRIVE Address HUDSON - FL34667				

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

City, State & Zip

Daytime Telephone number

(727)869-9292

NOV 3 0 1999 K. Righte

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

HAPPY DAYS FISHERIES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7218 DiPAOLA DRIVE, HUDSON, FL 34667

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 COMMON VOTING STOCK OF A SINGLE CLASS

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

DOROTHY A. DURAN
7218 DiPAOLA DRIVE HUDSON, FL 34667

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

NICHOLAS R. DURAN 7218 DiPAOLA DRIVE, HUDSON, FL 34667

Signature/Incorporator

NOU 19, 1999

Date

(An additional article must be added if an effective date is requested.)

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 I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date

TRANSMITTAL LETTER

P99000103326

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	7218 DiPAOLA DR A HUDSON, FL34667	99 NOV 22 SECRE JARY TALLAHASSE	
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