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PICK-U	JP WAIT MAIL	
	(Business Entity Name)	
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Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
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AUTHORIZATIO	N BY PHONE TO	
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TRANSMITTAL LETTER

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

Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:		
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	□ \$78.75 □ \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED		
FROM: Donna Chevalier Name (Printed or typed)			
104-B Pompa	ano Dr SE		
ST. Peters burgcity, to	Fl , 33705		

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) The name of the corporation shall be: An Expression of Love- Inc. ARTICLE II PRINCIPAL OFFICE 104-B Pompano Dr S& ST. Peteroburg, fl 33705 The principal place of business/mailing address is: ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: 100 he number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) DonnA Chevalier(P) The name(s), address(es) and title(s): Jakes Path 104-B Pampano Dr SE Largo , fl ST. Petersburg, f1. 33705 REGISTERED AGENT The name and Florida street address of the registered agent is: Donna Chevalier 104-B Pompano Dr SE ST. Petersburg, A 33705 ARTICLE VII INCORPORATOR Donna Chevalier The <u>name and address</u> of the Incorporator is: 104-B Pompano Dr SE St. Petersburg , fl 33705 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/Incorporator