

PO 3000085818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

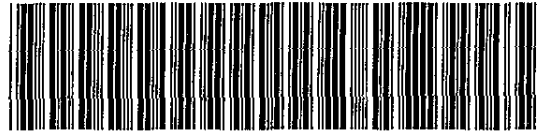
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400021858134

08/01/03--01024--019 **87.50

FILED
03 AUG -1 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TS
7/2
16/1

TRANSMITTAL LETTER

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

SUBJECT: CASTLE RISING, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

ADDITIONAL COPY REQUIRED

FROM: STEPHANIE MEALING
Name (Printed or typed)

107-26th AVE, SUITE #7
Address

ST. PETE BEACH, FL. 33706
City, State & Zip

727-363-4351
Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

CASTLE RISING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

107- 26th AVE., SUITE 7
ST. PETE BEACH, FL. 33706

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BOOK SALES

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

STEPHANIE MEALING
107- 26th AVE. SUITE 7
ST. PETE BEACH, FL. 33706

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

STEPHANIE MEALING
107- 26th AVE. SUITE 7
ST. PETE BEACH, FL. 33706

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEPHANIE MEALING
107- 26th AVE. SUITE 7
ST. PETE BEACH, FL. 33706

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

Stephanie Mealing
Signature/Registered Agent

July 29, 2003
Date

Stephanie Mealing
Signature/Incorporator

July 29, 2003
Date

FILED
03 AUG - 1 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA