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TRANSMITTAL LETTER

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

700002796167-4

-03/05/99--01082--013
*****87.50 *****87.50

SUBJECT: SHARON'S COLLECTION, 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: SHARON S. CRUMRINE
Name (Printed or typed)

2793 OCEAN OAKS DRIVE N.
Address

Fernandina Bch, FL 32034
City, State & Zip

904-733-8731
Daytime Telephone number

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

FILED
99 MAR -5 AM 10:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

SHARON'S COLLECTION, Inc.

ARTICLE II PRINCIPAL OFFICE

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

**5472 First Coast Highway
Suite #3
Amelia Island, FL 32034**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **10,000**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

**Sharon S. Crumrine
5472 First Coast Highway
Suite #3
Amelia Island, FL 32034**

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

**Sharon S. Crumrine
2793 Ocean Oaks Drive North
Fernandina Beach, FL 32034**

ARTICLE VI EFFECTIVE DATE

The effective date of these articles of incorporation shall be **March 1, 1999**

Sharon S. Crumrine
Signature/Incorporator

3-4-99
Date

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99 MAR -5 AM 10:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

Shawn S. Lumine
Signature/Registered Agent

(nothing follows)

3-4-99
Date

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99 MAR -5 AM 10:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA