

TRANSMITTAL LETTER

P00000000S183

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

00 JAN 10 AM 11:21
TALLAHASSEE, FL 32314

SUBJECT: Twin hearts INC.

(Proposed corporate name - must include suffix)

000003093900--3

-01/11/00--01013--008

*****78.75 *****78.75

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: PATRICIA O'Brien

Name (Printed or typed)

11477 NW 39th CT

Address

Coral Springs FLA 33065

City, State & Zip

954-781-8687

Daytime Telephone number

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

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:

Twinhearts INC.

ARTICLE II PRINCIPAL OFFICE

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

11477 NW 39th CT
CORAL SPRINGS FLA 33065

ARTICLE III SHARES

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

PATRICIA O'BRIEN - 100 total shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PATRICIA O'BRIEN
11477 NW 39th CT
CORAL SPRINGS FLA 33065

ARTICLE V INCORPORATOR

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

President - PATRICIA O'BRIEN
11477 NW 39th CT
CORAL SPRINGS FLA. 33065



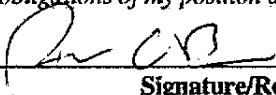
Signature/Incorporator

1-4-00

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

1-4-00

Date