TRANSMITTAL LETTER

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

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Specialty BEARS 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

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: LARRY W. MCCALLEY
Name (Printed or typed)

P.O. Box 580005
Address

ORLANDO, FL 32858
City, State & Zip

(407) 445-//69

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 Flori	ride
Business Corporation Act, hereby adopts the following Articles of Incorporation.	

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	TOSEE, 1	FLORIDA

ARTICLE I NAME
The name of the corporation shall be:

SpecialTy BEARS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5290 North Orange Blossom TrAIL #205, ORLANDO, FC 32810 mailing Address: 1- welden do, FC 3258-0005

ARTICLE III *SHARES*

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000 Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LARRY W. MCCACCEY 5290 North orange Blossom Trail # 205 Orlando, FC 32810

ARTICLE V INCORPORATOR

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

LARRY W. MCCALLEY P.O.Box 580005 Orlando, FL32858 Signature/Incorporator

Marcia R. Bowen P.o. Box 580005 Orlando, FL. 32858

(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 Age

fanuary 14,200