TRANSMITTAL LETTER

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

SUBJECT: 900003106939 -01/21/00--01088--016 *****87.50 *****87.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$87.50 □\$78.75 \$70.00 \$78.75 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED

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



ARTICLES OF INCORPORATION

DO JAN 21 PM 3:04

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following AND ANTION. TALLAHASSEE, FLORIDA

ARTICLE I

The name of the corporation shall be: Cloud Nine and Company, Toc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be: U Box 62066, Tallahassee, FL 32313.

ARTICLE III SHARES

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

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial agent are: Dominique Joseph, 5822 Haverhill Rd., West Palm Beach, FL 33407.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Dominique Joseph, 5822 Haverhill Rd., West Palm Beach, FL 33407.

Signature/Incorporator .

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 Ages

Date