TRANSMITTAL LETTER

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

53

SUBJECT Homemade Memories 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

X \$78.75

Filing Fee & Certified Copy \$131.25

Filing Fee,

Certified Copy & Certificate

FROM:

Homemade Memories Inc. 13/15E Palm Ron Ro Pov+St. Lucie, FL 34952 561-335-7394

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

FILED

2000 JAN 20 AM 8 53

ARTICLES OF INCORPORATION

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

ARTICLE | NAME

The name of the corporation shall be:

Homemade Memories Inc.

ARTICLE II PRINCIPAL OFFICE

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

1311 SE Palm Bon Rd.
Port St. Lucie, FL 34952

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 address of the initial registered agent is:

Jennifer Legler
13/18/E Palm Bon Rol.
Port St. Lucie, FL 34952

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Jennifer Legler 103 Se Camelot Gardens blvd Port St. Lucie, FL 34952 —

Meribeth Sterrett 1311 Se Palm Beach Rd. Port St. Lucie, FL 34952

Heather Buchanan 2650 Se Carthage Port St Lucie, Fla. 34952

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this ____10th day of December 1999.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF

REGISTERD AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The Name of the corporation is:

 Homemade Memories Inc.
- 2. The Name and address of the registered agent and office is:

Jennifer Legler

1311 SE Palm BODRO.

Port St. Lucie, FL 34952

Daytime Phone #: 561385-7394

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)

(Date)