

TRANSMITTAL LETTER

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

FILED
00 FEB -7 AM 8:08
TALLAHASSEE, FLORIDA

SUBJECT:

A Lifetime of Memories

(Proposed corporate name - must include suffix)

800003125798--5
-02/07/00--01102--010
*****87.50 *****87.50

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:

Dawn L. Foens

Name (Printed or typed)

218 Willowick Ave.

Address

Temple Terrace, FL 33617

City, State & Zip

813-984-1185

Daytime Telephone number

Dawn NAME
AUTHORIZATION BY PHONE TO
CORRECT Suffix
DATE 2-14-00
DOC. EXAM 72

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

FEB 1 4 2000

FEB 1 4 2000

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:

A Lifetime Of Memories Inc.

ARTICLE II PRINCIPAL OFFICE

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

218 Willowick Ave.
Temple Terrace, Fl. 33617

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

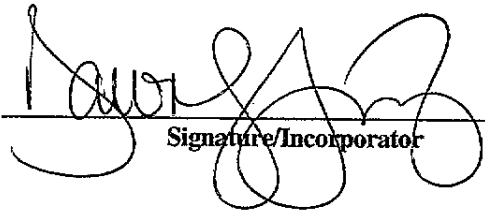
The name and Florida street address of the initial registered agent are:

Dawn L. Foens
218 Willowick Ave. Temple Terrace, Fl. 33617

ARTICLE V INCORPORATOR

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

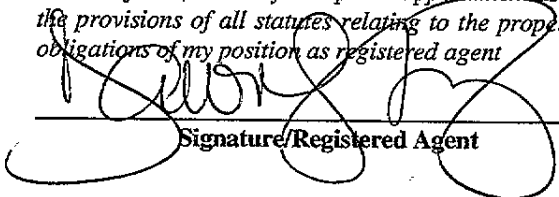
Dawn L. Foens
218 Willowick Ave. Temple Terrace, Fl. 33617


Signature/Incorporator

1-24-00
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

1-24-00
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 FEB -7 AM 8:08

FILED