

TRANSMITTAL LETTER

P0000026293

Department of State
Director of Corporations
P. O. Box 6227
Tallahassee, FL 32314

SUBJECT: Ready Set Party, Inc.
(Proposed corporate name - must include suffix)

100003162781--2
-03/08/00--01096--008
*****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: Kristie O'Keefe
Name (Printed or typed)

2832 Oak Street Apt. D
Address

Jacksonville, Florida 32205
City, State & Zip

(904) 384-3498
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE FLORIDA
00 MAR -8 AM 10:11
FILED

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:

Ready Set Party, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4845 Belle Terre Parkway
Palm Coast, Florida 32164

ARTICLE III SHARES

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

200 no par shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

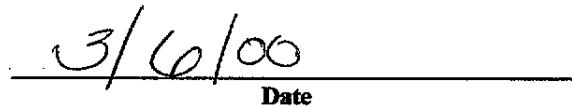
Kristie O'Keefe
4845 Belle Terre Parkway
Palm Coast, Florida 32164

ARTICLE V INCORPORATOR

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

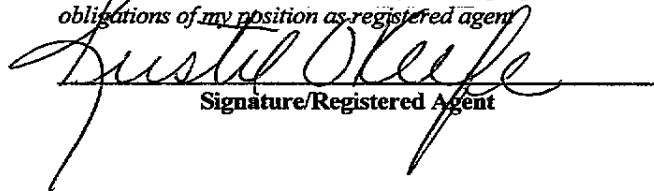
Kristie O'Keefe
2832 Oak Street Apt. D
Jacksonville, Florida 32205

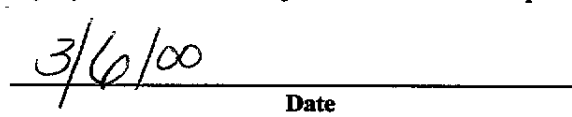

Signature/Incorporator


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


Date

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00 MAR -8 AM 10:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA