

TRANSMITTAL LETTER

P000000033215

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

SUBJECT: DANCE WORKS, INC.

(Proposed corporate name - must include suffix)

300003186753--1
-03/28/00--01031--003
*****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: RICHARD D. Mc MORROW

Name (Printed or typed)

(MAILING ADDRESS)

P.O. BOX 6002 (2929 N.E. 3RD ST.)

Address

OCALA, FLA 34478

City, State & Zip

(352) 690-1970

Daytime Telephone number

FILED
00 MAR 28 AM 9:10
STATE OF FLORIDA
TALLAHASSEE

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

C.C.
4-3-00

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:

DANCE WORKS, INC

ARTICLE II PRINCIPAL OFFICE

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

2929 N.E. 3RD ST.
OCALA, FLA 34470

P.O. BOX 6002
OCALA, FLA 34478

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

RICHARD D. Mc MORROW
2929 N.E. 3RD ST.
OCALA, FLA 34470

ARTICLE V INCORPORATOR

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

RICHARD D. Mc MORROW
2929 N.E. 3RD ST.
OCALA, FLA 34470



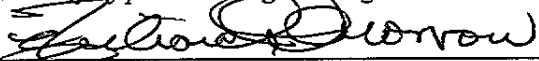
Signature/Incorporator

03-10-2000

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

03-10-2000

Date

FILED
MAR 28 AM 9:10
STATE OF FLORIDA
TALLAHASSEE, FLORIDA