TRANSMITTAL LETTER

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

Stef & Company, SUBJECT: (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

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: _	Stephanie M. Frankel Name (Printed or typed)	
	Name (Printed or typed)	
	"COO	
	5520 Gunn Hwy. #608 Address	
	Address	
	17. 22024	
	Tampa, Florida 33624	
	City, State & Zip	
	(****) 000 0001	
	(813) 908-3091	-
	Daytime Telephone number	

Sincerely,

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: Stef & Company, Inc.

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ARTICLE II PRINCIPAL OFFICE

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

5520 Gunn Hwy. #608

Tampa, Florida 33624

<u>ARTICLE III SHARES</u>

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 Florida street address of the initial registered agent are:

Stephanie Frankel 5520 Gunn Hwy. #608

ARTICLE V INCORPORATOR

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

5520 Gunn Hwy. #608 Tampa, Florida 33624 Stephanie Frankel

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