## P000000 38165

## TRANSMITTAL LETTER

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

800003201858--4 -04/10/00--01127--007 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: 101 SPECIALITIES INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  AND SOLUTION OF THE PROPERTY							
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  APR  APR  CHECK							
□ \$70. Filing F	00	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 \$7.50	1: 35		
FROM: DAWN RICE Name (Printed or typed)							
6846 NW 69 COURT							
	~	TAMARAE City,	FL 3335 State & Zip	2/			

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
ARTICLE I NAME The name of the corporation shall be:  101 SPECIALITIES, INC.		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:  6846 NW 69 COURT  TAMARAE FC 3333—(  ARTICLE III PURPOSE The purpose for which the corporation is organized is:  TO Sell Gaff Hems		FILED  00 APR 10 PM 1:35  SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE IV SHARES The number of shares of stock is: /	, <del></del>	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):		-C-ta
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:  6846 NW 69 COURT TAMPARAC TO 33321	  	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  DAWN MCE	*****	
Having been named as registered agent to accept service of process for the abov	**************************************	
certificate, Nam familiar with and accept the appointment as registered agent and	d agree to act in this capacity	

Signature/Registered Agent

Signature/Incorporator