

TRANSMITTAL LETTER

P00000047599

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

700003246507--5
-05/10/00--01050--015
*****122.50 *****78.75

SUBJECT: MIMI'S SUN DERSESSES ETC., INC.
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: CAROL WILLIAMS
Name (Printed or typed)

1629 University Boulevard N.
Address

Jacksonville. Florida 32211
City, State & Zip

Daytime Telephone number

FILED
00 MAY 10 PM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

cb
5-12-00
2

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: MIMI'S SUN DRESSES ETC., INC.

ARTICLE II PRINCIPAL OFFICE

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

1629 University Boulevard N.
Jacksonville, Florida 32211

ARTICLE III SHARES

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

FIVE-HUNDRED (500) SHARES OF ONE DOLLAR (\$1.00) PAR
VALUE COMMON STOCK WHICH SHALL BE DESIGNATED "COMMON SHARES".

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

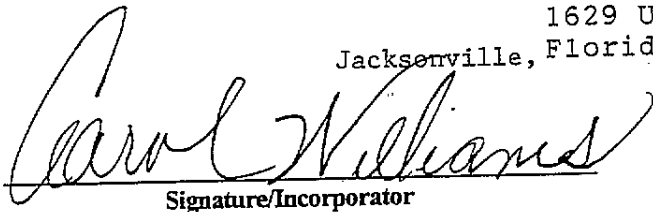
The name and Florida street address of the initial registered agent are:

CAROL WILLIAMS
1629 University Boulevard N.
Jacksonville, Florida 32211

ARTICLE V INCORPORATOR

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

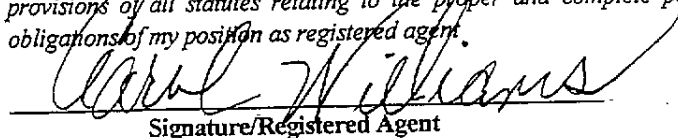
CAROL WILLIAMS
1629 University Boulevard N.
Jacksonville, Florida 32211


Signature/Incorporator

May 08, 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

May 08, 2000
Date

FILED
00 MAY 10 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA