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SECRETARY OF STATE ALLAHASSEE, FLORES.

# TRANSMITTAL LETTER

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

SUBJECT:	TWINS SUPERSTORE, INC.  (Proposed corporate name - must include suff	800003313438 -07/05/0001089021 *****78.75 *****78.75 ix)
Enclosed is an	n original and one (1) copy of the articles of inc	orporation and a check for:
[ ] \$ 70.0 Filing Fee	0 [XX] \$ 78.75 [ ] \$ 122.50 [ Filing Fee Filing Fee & Certificate & Certified Cop	] \$131.25 Filing Fee  OY Certified Copy & Certificate
FROM	I: <u>SYLVIA STAMMEL</u> Name (print or type)	<del></del>
	8522 BLACK MESA DRIVE Address	

407-658-0234

ORLANDO, FL 32829

Daytime Telephone number

City, State & Zip

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES

#### ARTICLES OF INCORPORATION



The undersigned incorporator(s)(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

TWINS SUPERSTORE, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

8522 BLACK MESA DRIVE ORLANDO, FL 32829

#### ARTICLE III SHARES

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

6000 SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SYLVIA STAMMEL 8522 BLACK MESA DRIVE ORLANDO, FL 32829

# ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SYLVIA STAMMEL 8522 BLACK MESA DRIVE ORLANDO, FL 32829

The undersigned i	incorporator(s) has (have) execut	ed these Articles of	f Incorporation thi	S
29	JUNE	00		
	day of	, 20	<del>.</del>	
_Sylve	Signature Signature	-	·	
	Signature		<del></del>	
	Signature	······································	Taran . 1 Arros	· , -



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# REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	TWINS SUPERSTORE, INC. The name of the corporation is:
2.	The name and address of the registered agent and office is: SYLVIA STAMMEL
	(Name) 8522 BLACK MESA DRIVE
	(P.O. Box <u>not</u> acceptable) ORLANDO, FL 32829
	(City, State, Zip)

Having been named as registered agent and to accept service of process fort he above stated corporation at the place designed 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)