

PO0000067235

ORIGINAL FILING FEE

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

600003318306--6  
-07/10/00--01115--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: The Gourmet Chocolate Shoppe, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

<input type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>			

FROM: Jennifer Carlin  
Name (Printed or typed)

5350 SW 57th Street  
Address

Davie, FL 33314  
City, State & Zip

561-989-5743  
Daytime Telephone number

00 JUL 10 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
**FILED**

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

Monday, July 03, 2000

## AFFIDAVITE

The purpose of this Affidavit is to notify the state that I **do not** intend to revoke the voluntary dissolution of The Gourmet Chocolate Shoppe, Inc. which was filed on Feb. 3, 2000.

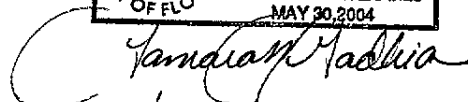
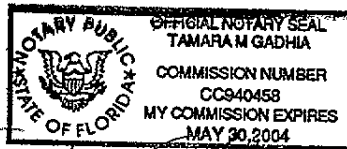
I therefore grant the state of Florida to release the name immediately, **The Gourmet Chocolate Shoppe, Inc.**, for corporation.

Thank you for your prompt service in this matter.

Best regards,



Jennifer Carlin



July 7, 2000

**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:

*The Gourmet Chocolate Shoppe, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*5350 S.W. 57th Street  
Davie, FL 33314*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

\_\_\_\_\_

ARTICLE IV SHARES

The number of shares of stock is:

*100*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*Jennifer Carlin  
5350 SW 57th Street  
Davie, FL 33314*

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

*Jennifer Carlin  
5350 SW 57th Street  
Davie, FL 33314*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Jennifer Carlin  
5350 SW 57th Street  
Davie, FL 33314*

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*[Signature]*  
\_\_\_\_\_  
Signature/Registered Agent

*7/6/2000*  
\_\_\_\_\_  
Date

*[Signature]*  
\_\_\_\_\_  
Signature/Incorporator

*7/6/2000*  
\_\_\_\_\_  
Date

**FILED**  
00 JUL 10 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA