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TRANSMITTAL LETTER

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

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SUBJECT: MOON GODS ETS OF GAINESVILLE, CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original	al and one(1) copy of the articles	s of incorporation and a c	heck for:		
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	00	
FROM:	LAURA S	S. DOLJAN'C inted or typed)	<u>24</u>	OT SON CO	
		1. 170 ¹⁵ St	E I CORIDA	PH 3:5	FILED
	NEWBERRY,	FC 3266	69	. 7	
	200	2-5502			

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

Daytime Telephone number

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L'Bridge July , C.

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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: MOON GODDESS OF GAINESVILLE, CO
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4018-B N.W. 6455F E CAINESVILLE, FR 32609 ARTICLE III PURPOSE
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
ARTICLE IV SHARES The number of shares of stock is: (OO SHARES (ONE HUNDRED) PHA! OO (ONE HUNDRED)
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): LAURA S. DOLTANICA _ ZOIS N.W. 170 55. Nowbenny, FC 32669
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: LAURA S. DOLJANICA - 2018 N.W. 17045 NOWBENRY, FC 32669
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
LAURA S. DOLJANICA ZOIB N.W. 170 th ST NOWISONNY, FC 32669

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
Alo, 100
Signature/Registered Agent Date

Signature/Incorporator