TRANSMITTAL LETTER ODE Department of State ODG 78/2 A V

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

SUBJECT:		eginnings, Inc		
	(Proposed o	corporate name - must include suffi	ix) # 0003361; -08/18/000; *****78.75	265— 1001—011 *****78.
Enclosed is an orig	rinal and one(1) copy of the a	rticles of incorporation and a ch	neck for:	
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	ADDITIONAL COP	Section \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM	3084 Wat Tallahass	Address	DIVISION OF CORPORATION	RECEIVED
		me Telephone number	SECF), ,

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

ARTICLES OF INCORPORATION

NAME

The name of the corporation shall be:

ARTICLE I

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

BRILLIANT BE	GINNINGS, INC	· .	
ARTICLE II PRINCIPAL OF The principal place of business and mail		ll be:	
1736 Highland Place	, Tallahassee, Flo	rida 32308	
ARTICLE III SHARES The number of shares of stock that this continue is a second stock that the second shares of stock that the second stock that the second shares of sh	corporation is authorized to have ou	ntstanding at any one ti	me is:
ARTICLE IV INITIAL REGIS The name and Florida street address of the same address of the	STERED AGENT AND STRE the initial registered agent are:	EET ADDRESS	0
1sabel Stabile 3086 Waterford Dri ARTICLE V INCORPORATO	<u>R</u>	띩	AND 17 PM
The name and address of the incorporal ISabel Stabile 3086 Waterford Drug Tallahassee, F1, 32	-	n are: FLORIDA	D 3: 59
Signature/Incorporator		Avgust 17	, 2000
- James Politica		Jac	

(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

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