

TRANSMITTAL LETTER

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

FILED
00 OCT 17 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
400003427614-3
-10/17/00--01064--001
*****78.75 *****78.75

SUBJECT: Gowns Express, 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 of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Claudio Orlando
Name (Printed or typed)

2142 E. Silver Springs Blvd.
Address

Ocala, Fl. 34470
City, State & Zip

352-622-2400
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit), ~~the undersigned incorporator~~
~~hereby adopt the following Articles of Incorporation, in compliance~~
ARTICLE I NAME with the Florida Business Corp Act.

The name of the corporation shall be:

Gowns Express, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2142 E. Silver Springs Blvd.
Ocala, Fl. 34470

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Sales + Rental of Clothing

ARTICLE IV SHARES

The number of shares of stock is:

one thousand shares of no par value, common stock

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Claudio Orlando
2142 E. Silver Springs Blvd.
Ocala, Fl. 34470

ARTICLE VI REGISTERED AGENT

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

Claudio Orlando
2142 E. Silver Springs Blvd.
Ocala, Fl. 34470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Claudio Orlando
2142 E. Silver Springs Blvd.
Ocala, Fl. 34470

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

Claudio Orlando

Signature/Registered Agent

10/16/00

Date

Claudio Orlando

Signature/Incorporator

10/16/00

Date