TRANSMITTAL LETTER Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 Zoo Boo, INC. SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFL) 40000 -015 *87.50 米米米米 ςη Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **X** \$87.50 □ \$78.75 **3** \$78.75 \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Name (Printed or typed) be Cir suit M.11-Marino 21 Address 3318 NG 7/H City, State & Zip 786 395 142 1-305-705-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.	
in compliance with Chapter 607 and/or Chapter 621, F.S.	(Profit)
ARTICLE I NAME	<u>مورد و بالامرا</u> . مارو میشد مارد او را مارد امار می مارد .
The name of the corporation shall be:	
ZOOBOO, INC.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 21399 Marina Cove CIR SUN Aventurg FIA. 33180	
AUENIO 9 FIA. 35180	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
N/A	
ARTICLE IV SHARES The number of shares of stock is:	a mana a second a second as
100,000 shares	an a
surves	
ARTICLE V INITIAL OFFICERS/DIRECTORS	(optional)
Barbara Nancy Wohl (pres)= Karen Friedman (Vice-pre	21399 Maring Love CIR III
Karen Friedman (VICE-DR	es) Aventurg Fin. 55180
) 1004 NW 61 terr
	Parkland FIA. 33067
ARTICLE VI REGISTERED AGENT);00/
The name and Florida street address of the registered agen	tis:
Barbara Nancy Wohl	
21399 Maring Cove Cir Mil	ſ · · · · · · · · · · · · · · · · · · ·
Aventura FIA. 33180	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	1 2. Μαζίζου
	-
Barbara Nancy Wohl	+ 10 Fla 22180
alsyg Marina Cove Cir	M-11 Aventura F1A. 33180
*******	*****
Having been named as registered agent to accept service of process for certificate I am familiar with and accept the process for	the above stated composition of the state of the state
certificate, I am familiar with and accept the appointment as registered a	gent and agree to act in this capacity
Signature/Registered Agent	10/23/00
Signature/Incorporator	10/23/00
	Date

Signature/Incorporator

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