

TRANSMITTAL LETTER

P00000115993 FILED  
00 DEC 15 PM 12:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: Cosmic Creations Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000003502210--2  
-12/15/00--01056--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: Marlene R. Brown  
Name (Printed or typed)

866 BAYSHORE DR.  
Address

Englewood, FL 34223  
City, State & Zip

941-475-6266  
Daytime Telephone number

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

Handwritten initials/signature

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

*Cosmic Creations, Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

*866 Bayshore Dr.  
Englewood, FL 34223*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *To engage in any lawful act or activity for which corporations may be formed. Nothing herein shall be deemed to limit or exclude in any manner any capacity, power, right, privilege or authority granted to, or inhering, within this corporation by virtue of the common law and the General Corp. Law of Florida,*

ARTICLE IV SHARES

The number of shares of stock is:

*850*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*Marlene R. BROWN (President)  
Michael A. BROWN (Vice President)*

ARTICLE VI REGISTERED AGENT

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

*Marlene Brown  
866 Bayshore Dr.  
Englewood, FL 34223*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Marlene Brown + Michael BROWN  
866 Bayshore Dr.  
Englewood, FL 34223*

\*\*\*\*\*  
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

*Marlene R. Brown*  
\_\_\_\_\_  
Signature/Registered Agent

*12-12-00*  
\_\_\_\_\_  
Date

*Marlene R. Brown Michael A. Brown*  
\_\_\_\_\_  
Signature/Incorporator

*12-12-00*  
\_\_\_\_\_  
Date