P00001/7006	
Department of State  Division of Corporations  P. O. Box 6327  Tallahassee, FL 32314	DO DEC 26 PM 1: 13
SUBJECT: Shicken's Sinsation INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)	
700035125 -12/26/00016 *****78.75  Enclosed is an original and one(1) copy of the articles of incorporation and a check for:	
□ \$70.00 □ \$78.75 Filing Fee Filing Fee & Certificate of Status  Example 2	
FROM: Shirley A. Highbourg	
P.O. Box 713 Address	

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

ARTICLES OF INCORPORATION	and the second of the second o
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	·
ARTICLE I NAME	DO DEC 26
The name of the corporation shall be:	
Shirley's Sinsation Inc.	6 P P P
ARTICLE II PRINCIPAL OFFICE	THE T
The principal place of business/mailing address is:	温 3
P.O. Box 713	
Vernon FL32462	<del> </del>
ARTICLE III PURPOSE	a and the second of the second
The purpose for which the corporation is organized is:	
	••
ARTICLE IV SHARES	<u>-</u>
The number of shares of stock is:	***
ı	
ARTICLE V INITIAL OFFICERS (DIRECTORS (optional)	
The name(s) and address(es):	
•	
ARTICLE VI REGISTERED AGENT	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	u samuri sam
Shirley Hightower	
4544 HWY 79/P.D.BOX713	
Vernon FL 32462	
ARTICLE VII INCORPORATOR	entralismo de la companya de la com La companya de la co
The <u>name and address</u> of the Incorporator is:	•
Shirley Hightower 4544 Hoy 79/ P.O. BOX 13	
4544 Moy 700/ P.O. DOX 112	
Vernon FL 30462 ************************************	*********
Having been named as registered agent to accept service of process for the above stated of	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
Drily attendance	12-26-00
Signature/Registered Agent	Date
50.1 H. Vo-	30.51
Signature/Incorporator	12-26-00 Date