Pologood 327

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

SUBJECT:	OPROPOSED CORPORAT	BINGS IN		
Englaced is an origina			70000351580 -12/28/0001056 *****87.50 ***	
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	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO		
FROM:	Nilda G Name (Pr 11750 N	inted or typed) of .W. 6th St ddress		
	Plantation, FL 33325 City, State & Zip			
	954 by Daytime Te	17-9131 lephone number	OO DECRI	
N	OTE: Please provide the ori	ginal and one copy of t	DEC 28 ANII: 42 CRETARY OF STATE LAHASSEE, FLORID the articles.	

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	
Nilda Gibbings Inc.	
The principal place of business/mailing address is:	
P.O.Box 550941 Ft. Lauderdale, FL 33355 ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
To Protect Myself Legally	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):	
The name(s) and address(es): Nilda Gibbings 11750 N.W. 64454	
Plantation, FL 33325	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	-
Evelyn Roberts 1520, N.W. 21st Terrace	
Doynton Bch, FL 33436	
The name and address of the Incorporator is:	
Nilda Gibbings 11750 N.W. 644 St	
++++++++++++++++++++++++++++++++++++++	
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	
Eveline Robert	
Signature/Registered Agent Date	
Signature/Incorporator 12/22/00 Date	