TRANSMITTAL LETTER POINTED 18523

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

300003718243---C +02/19/01--01066--004 ******70.00 ******70.00

SUBJECT:	Perfectly				
	(PROPOSEI	CORPOR	ATÉ NAME -]	MUST INC	LUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

3 \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Section 1997 Status Status Status Status Status Status		
FROM:		r inted or typed)			<u></u>
	PO Box 199	ddress	SECF	01	
		9474-0199 State & Zip	AHASSE	FEB 19	
	215-256-4545 Daytime To	elephone number	OF STATE	AM 9: 1	

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

Perso

Signature/Incorporator

ARTICLES OF INCORPORATION	01 IA
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	ARE FEB T
The name of the corporation shall be:	S =
Perfectly Sweet Treats, Inc.	Jan 14 and 14 a
	三当 ■ ロ
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	PATT
The principal place of outsidess/minutes address to	A 4
1070 Palm Coast Parkway NW, Suite #1, Palm C	oast, FL 32137
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
For the retail sale of food and all other pu	rposes permitted by law
ARTICLE IV SHARES	
The number of shares of stock is:	•
10,000	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional)	
The name(s) and address(es):	
Jessica Ivy Bronson, 1070 Palm Coast Parkway	NW, Suite #1,
Palm Coast, FL 32137	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Jessica Ivy Bronson, 1070 Palm Coast Parkway	NW, Suite #1,
Palm Coast, FL 32137	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	•
	
Jessica Ivy Bronson, 1070 Palm Coast Parkway	NW, Suite#1,
Palm Coast, FL 32137	
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Having been named as registered agent to accept service of process for the above stated cor certificate, I am familiar with and accept the appointment as registered agent and agree to a	porasson ta tree place designace at this of in this Capacity
Im Imm	-1/21/4
Wasa II/II/OV	01/61/01
Signature/Registered Agent	Date