

TRANSMITTAL LETTER

P01000031815

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

700003856097--8  
-03/16/01--01070--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: ADDED PRESERVATIVES, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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**

01 MAR 26 AM 8:43  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: GAIL ALEXIS HENRIKSON  
Name (Printed or typed)

P.O. Box 2581  
Address

NEW SMYRNA BEACH, FL 32170-2581  
City, State & Zip

(904) 424-8482  
Daytime Telephone number

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

W01-6274

CB  
3-20-01



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

March 20, 2001

GAIL ALESIX HENRIKSON  
PO BOX 2581  
NEW SMYRNA BEACH, FL 32170-2581

SUBJECT: ADDED PRESERVATIVES, INC.  
Ref. Number: W01000006274

We have received your document for ADDED PRESERVATIVES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6929.

Joey Bryan  
Document Specialist

Letter Number: 801A00016814

FILED  
01 MAR 26 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: **ADDED PRESERVATIVES, INC.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

BUSINESS LOCATION

**303 Cortez Street  
New Smyrna Beach, FL 32169**

MAILING ADDRESS

**P. O. Box 2581  
New Smyrna Beach, FL 32170-2581**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**HISTORIC PRESERVATION PLANNING CONSULTANT**

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

**GAIL ALEXIS HENRIKSON, PRESIDENT  
P. O. BOX 2581  
NEW SMYRNA BEACH, FL 32170-2581**

ARTICLE VI REGISTERED AGENT

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

**GAIL ALEXIS HENRIKSON  
303 CORTEZ STREET  
NEW SMYRNA BEACH, FL 32169**

ARTICLE VII INCORPORATION

The name and address of the Incorporator is:

**GAIL ALEXIS HENRIKSON  
303 CORTEZ STREET  
NEW SMYRNA BEACH, FL 32169**

\*\*\*\*\*  
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.

Gail Henrikson  
Signature/Registered Agent

3/26/01  
Date

Gail Henrikson  
Signature/Incorporator

3/26/01  
Date