

TRANSMITTAL LETTER

P010000041872

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

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-04/23/01--01140--021
*****78.75 *****78.75

SUBJECT:

COFFEE LOVERS DREAM ~~COFFEE~~ 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

FROM:

MICHAEL CIANFARANI

Name (Printed or typed)

13029 KEEL COURT

Address

HUDSON FLORIDA 34667

City, State & Zip

1 727 868 6339.

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 APR 23 PM 3:03

FILED

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

4/25/01

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:

COFFEE LOVERS DREAM INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal - 118 South St - USA Fleamarket, Port Richey, Florida 34668
MAILING - 13029 KEEL COURT HUDSON FLORIDA 34667

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Profit - also to engage in any lawful business activity permitted by Florida Business Corp. act for profit.

ARTICLE IV SHARES

The number of shares of stock is:

1000 1.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

13029 Keel Ct ← Director 1 - Michael Cianfarani
Hudson Fl. 34667. Director 2 - Sarah Cianfarani
13029 Keel Court Hudson, FL. 34667.

ARTICLE VI REGISTERED AGENT

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

SARAH ~~MICHAEL CIANFARANI~~
CIANFARANI, 13029 KEEL CT HUDSON FL. 34667

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL CIANFARANI
13029 KEEL CT
HUDSON FL. 34667

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

Sarah Cianfarani
Signature/Registered Agent

4.18.01
Date

Michael
Signature/Incorporator

4.18.01.
Date