

PO1000114237

TRANSMITTAL LETTER

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

800004685008--9  
-11/16/01--01039--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Sharon's Treasures, 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: Sharon L. Blackman  
Name (Printed or typed)

116 Olive Tree Circle  
Address

Altamonte Springs, FL 32714  
City, State & Zip

407-788-0137  
Daytime Telephone number

no answer 1pm

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

01 DEC -4 AM 7:41

FILED

W0126673

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

D. WHITE DEC - 4 2001

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FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

November 21, 2001

SHARON L. BLACKMAN  
116 OLIVE TREE CIRCLE  
ALTAMONTE SPRINGS, FL 32714

SUBJECT: SHARON'S TREASURES, INC.  
Ref. Number: W01000026673

We have received your document for SHARON'S TREASURES, INC. and your check(s) totaling \$78.75. 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.

The registered agent must sign accepting the designation.

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) 245-6933.

Dale White  
Document Specialist  
New Filings Section

Letter Number: 901A00062329

# ARTICLES OF INCORPORATION

In compliance with Chapter 607, and/or Chapter 621, F.S. (Profit)

FILED

## ARTICLE I NAME

The name of the corporation shall be:

Sharon's Treasures, Inc.

01 DEC -4 AM 7:41

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

116 Olive Tree Circle

Altamonte Springs, FL  
32714

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell hand crafted products to the public.

## ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES @ \$1.00 a share.

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Sharon L. Blackman, President  
116 OLIVE TREE CIRCLE  
ALTAMONTE SPRINGS, FL  
32714

## ARTICLE VI REGISTERED AGENT

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

Sharon L. Blackman  
116 Olive Tree Circle  
ALTAMONTE SPRINGS, FL 32714

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sharon L. Blackman  
116 Olive Tree Circle  
Altamonte Springs, FL 32714

\*\*\*\*\*  
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

Signature/Registered Agent

Date

Signature/Incorporator

Date