

TRANSMITTAL LETTER

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

SUBJECT:

Sunshine City, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100004676511--0
-11/13/01--01052--021
*****87.50 *****87.50

Enclosed are 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:

Melinda DeVries

Name (Printed or typed)

1257 Clay St.

Address

Green Cove Springs, FL 32043

City, State & Zip

904-284-6141

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2001 DEC 13 PM 2:09

FILED

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

2545

W01-26107

12/13/01



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

FILED

2001 DEC 13 PM 2:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA

November 14, 2001

MELINDA DEURIES
1257 CLAY STREET
GREEN COVE SPRINGS, FL 32043

SUBJECT: SUNSHINE CITY, INC
Ref. Number: W01000026107

We have received your document for SUNSHINE CITY, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6973.

Claretha Golden
Document Specialist
New Filings Section

Letter Number: 701A00061377

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:

Melinda's Sunshine City, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1257 Clay St
Green Cove Springs, FL 32043

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To open Business Checking Account

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

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

2. Melinda DeVries
1257 Clay St,
Green Cove Spring FL 32043

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

2. Melinda DeVries
1257 Clay St, Green Cove Springs, FL 32043

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

Melinda DeVries

Signature/Registered Agent

Date

Melinda DeVries

Signature/Incorporator

12/12/01
Date

FILED

2001 DEC 13 PM 2:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA