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TRANSMITTAL LETTER

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

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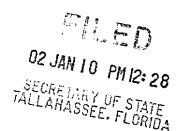
SUBJECT: MADE BY MOMS, INC.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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: CATHERINE LUCIANO
Name (Printed or typed)

2413 NW 49th LANE
Address

BOCA RATON, FL 33431
City, State & Zip

561. 995. 9391
Daytime Telephone number

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

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:

Made By Moms, Inc.

ARTICLE II   PRINCIPAL OFFICE
The principal place of business/mailing address is:

2413 NW 49th LANE
BOCA RATON, FL 33431

ARTICLE III   PURPOSE
The purpose for which the corporation is organized is:

FOR ANY AND ALL LAWFUL BUSINESS

ARTICLE IV   SHARES
The number of shares of stock is:

1,000

ARTICLE V   INITIAL OFFICERS/DIRECTORS (optional)
The name(s), address(es) and title(s):

LAURIE ZANOTTI
W293 N6728 CHERYL LANE
HARTLAND, WI 53029
PRESIDENT

CATHERINE LUCIANO
2413 NW 49th LANE
BOCA RATON, FL 33431
VICE PRESIDENT

ARTICLE VI   REGISTERED AGENT
The **name and Florida street address** of the registered agent is:

CATHERINE LUCIANO
2413 NW 49th LANE
BOCA RATON, FL 33431

ARTICLE VII   INCORPORATOR
The **name and address** of the Incorporator is:

CATHERINE LUCIANO
2413 NW 49th LANE
BOCA RATON, FL 33431

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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

_____   1/8/02
Signature/Registered Agent   Date

_____   1/8/02
Signature/Incorporator   Date