

7020000033483

TRANSMITTAL LETTER

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

800005139748-9  
-03/21/02--01059--019  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: SWEET DREAMS, 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: CHRIS PHILCOX  
Name (Printed or typed)

317 ST. GEORGE ST.  
Address

ST. AUGUSTINE, FL. 32084  
City, State & Zip

(904) 823-9761  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 MAR 21 PM 1:36

FILED

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:

SWEET DREAMS, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

317 ST. GEORGE STREET  
ST. AUGUSTINE, FL. 32084

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESTAURANT

## ARTICLE IV SHARES

The number of shares of stock is:

SIX HUNDRED (600)

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

CHRIS PHILCOX (P)  
317 ST. GEORGE ST.  
ST. AUGUSTINE, FL. 32084

WENDY PHILCOX (VP)  
317 ST. GEORGE ST.  
ST. AUGUSTINE, FL. 32084

## ARTICLE VI REGISTERED AGENT

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

CHRIS PHILCOX  
317 ST. GEORGE ST.  
ST. AUGUSTINE, FL. 32084

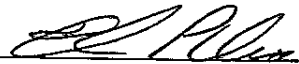
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CHRIS PHILCOX  
317 ST. GEORGE ST.  
ST. AUGUSTINE, FL 32084

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TALLAHASSEE, FLORIDA

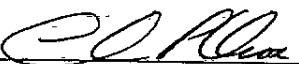
\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent CHRIS PHILCOX

3/15/02

Date



Signature/Incorporator CHRIS PHILCOX

3/15/02

Date