TRANSMITTAL LETTER

Department of State

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

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00

☐ \$78.75

Filing Fee

Filing Fee

& Certificate of Status

Filing Fee

& Certified Copy

☐ S87.50

Filing Fee, Certified Copy

& Certificate of

· - ---

Status

ADDITIONAL COPY REQUIRED

FROM: Lindal MKay Name (Printed or typed)	2 元
Name (Printed or typed)	10000000000000000000000000000000000000
1566 Ronkin Aces	2 页
A.dc.ress	
Tallahassee, F/323 City, State & Zip	10-35

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: JO-LYN'S TENTS & PARTY, INC.

02 MAY -8 PM 1:53
SECRETARY OF STATE
TALLAHASSEE H ORIDA

ARTICLE II C PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

472 C CAPITAL CIR. N.W. TALLAHASSEE, FL. 32304

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LINDA L. MCKAY 1566 RANKIN AVE. TALLAHASSEE, FL. 32310

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ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LINDA L. MCKAY 1566 RANKIN AVE. TALL, FL. 32310

8 day of Mary ; 2002.					
(An additional article must be added if an effective date is requested.)					
Levila Limber	-				
Signature					
Signature					

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	JO-LYN'S TENTS & PARTY, INC.		
2.	The name and address of the regist	ered agent and office is:	SECRETAL TALLAHAS	· · · · · · · · · · · · · · · · · · ·
W*************************************		(NAME)		
	1566 RANKI	N AVE.	FLOR	
	(P.O. Box	c or Mail Drop Box NOT ACCEPTABLE)		
	TALL, FL.	32310		
		(City/State/Zip)	•	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314