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TRANSMITTAL LETTER

FILED

02 AUG 29 PM 2:54

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2008007446212--6  
-08/30/02-01024-007  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Country Heart & Home, 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: Melinda B. Kelley  
Name (Printed or typed)

6417 Reef Circle  
Address

Tampa, FL 33625  
City, State & Zip

813.299-7800  
Daytime Telephone number

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

1/2  
9/3

**ARTICLES OF INCORPORATION**

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

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Country Heart & Home, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6417 Reef Circle, Tampa, FL 33625

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Retail Buoiness

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 (one Thousand)

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

Melinda B. Kelley, President  
6417 Reef Circle  
Tampa, FL 33625

David E. Kelley, V.P.  
6417 REEF Circle  
Tampa, FL 33625

**ARTICLE VI REGISTERED AGENT**

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

Melinda B. Kelley  
6417 Reef Circle, Tampa, FL 33625

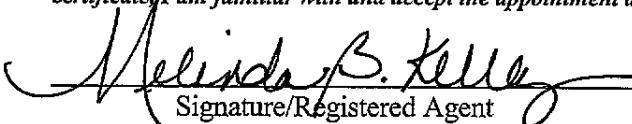
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Melinda B. Kelley  
6417 Reef Circle, Tampa, FL 33625

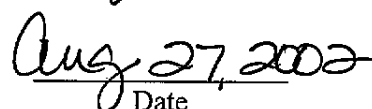
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Signature/Registered Agent

  
Date

  
Signature/Incorporator

  
Date