

TRANSMITTAL LETTER

PO2000095785

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

600007194546--7  
-08/19/02--01032--015  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: PARTY WORKS INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: LESLIE P. TRIPP  
Name (Printed or typed)  
163 RIVIERA Circle  
Address  
WESTON, FL 33326  
City, State & Zip  
954-217-9184  
Daytime Telephone number

FILED  
02 SEP -5 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA.

W-24210

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

Bm 9/5



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

August 20, 2002

LESLIE P TRIPP  
163 RIVIERA CIRCLE  
WESTON, FL 33326

SUBJECT: PARTY WORKS INC.  
Ref. Number: W02000024210

We have received your document for PARTY WORKS 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**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) 245-6931.

Becky McKnight  
Document Specialist  
New Filing Section

Letter Number: 802A00049028

# 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:

ALL ONE  
WORD  
(PARTY ~~WORK~~ INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

163 Riviera Circle WESTON, FL 33326

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT

## 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):

LESLIE P. TRIPP  
163 Riviera Circle  
WESTON, FL 33326  
PRESIDENT

Allen Cooke  
19421 SW 2nd ST.  
Pembroke Pines, FL  
VICE President 33029

## ARTICLE VI REGISTERED AGENT

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

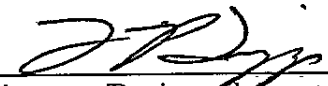
LESLIE P. TRIPP  
163 Riviera Circle  
WESTON, FL 33326

## ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

LESLIE P. TRIPP  
163 Riviera Circle  
WESTON, FL 33326

\*\*\*\*\*  
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 LESLIE P. TRIPP

8-01-02  
Date

  
Signature/Incorporator LESLIE P. TRIPP

8-07-02  
Date

FILED  
02 SEP -5 AM 10:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA