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TRANSMITTAL LETTER

FILED

02 SEP -3 AM 11:00

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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-09/03/02--01053--005

\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

SUBJECT: Mad Little Gerb, 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:

Marissa Bacoats  
Name (Printed or typed)

1575 Pinellas Bayway  
Address

Tierra Verde, FL 33715  
City, State & Zip

(818) 439-9993  
Daytime Telephone number

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

# ARTICLES OF INCORPORATION

## ARTICLE I CORPORATE NAME

The name of the corporation shall be **Mad Little Gerl, Inc.**

## ARTICLE II PRINCIPAL OFFICE

The principal place of business is: 1575 Pinellas Bayway, Tierra Verde, Florida 33715.

## ARTICLE III PURPOSE

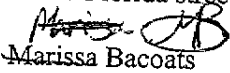
The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under **GENERAL CORPORATION LAW** of Florida other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the Florida Corporations Code.

## ARTICLE IV SHARES

The number of shares of stock is 10,000.

## ARTICLE V REGISTERED AGENT

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


  
Marissa Bacoats  
1575 Pinellas Bayway  
Tierra Verde, FL 33715

## ARTICLE VI INCORPORATOR

The name and address of the Incorporator is:

Carmen D. Mosley  
18401 Burbank Blvd., Ste 203  
Tarzana, CA 91356

Having been named as registered agent to accept services 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

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