

P020000100065

TRANSMITTAL LETTER

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

SUBJECT: Exclusive, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600007772056--27
-09/16/02--01064--005
*****87.50 *****87.50

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: Michele Hutchinson
Name (Printed or typed)

8917-116th Terrace South
Address

Boynton Beach, FL 33437
City, State & Zip

561-436-0169
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 SEP 16 AM 9:01

FILED

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

Bm 9/17 2

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Exclusive, Inc.
2. The principal place of business and mailing address of the corporation is: 8917- 116th Terrace South, Boynton Beach, FL 33437.
3. The corporation shall have the authority to issue 50,000 shares of stock.
4. The registered agent of the corporation is Michele Hutchinson and the registered street address is 8917- 116th Terrace South, Boynton Beach, Florida 33437.
5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows: Michael Hutchinson, Michele Hutchinson
8917- 116th Terrace South, Boynton Beach,
Florida 33437

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Michele Hutchinson whose street address is 8917- 116th Terrace South, Boynton Beach,
Florida 33437

Dated 9-11-02

Michele Hutchinson
Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 9-11-02

Michele Hutchinson
Registered Agent

Form 2
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA