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## TRANSMITTAL LETTER

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

SUBJECT:		oculates,	Inc.
	(PROPOSED CORPORATE	NAME - MUST INCLUD	E SUFFIX)
Enclosed is an origin	nal and one(1) copy of the artic	les of incorporation and a	check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
	Lyn Pec	FROM:  KSKAMP  rinted or typed)	<u> </u>
	Casselbe	Address  VVY FL35  State & Zip	2707

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	÷ <u>e</u>
ARTICLE I NAME  The name of the corporation shall be:  Leige Chocolates, Inc	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  1558 Elf Stone Dr  Casselberry FL 32707	
The purpose for which the corporation is organized is:  Selling Chocolede	-
ARTICLE IV SHARES The number of shares of stock is:	· · · ·
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:  MAILU B. ELCKSK ONP  LISS ELF STONE  CASSEL DER M. T. C. 3 2707  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  LINN PLCKSKAMP	03 FEB 27 AM 9: 53 SECRETARY OF STATE TALLAHASSEE, FLORIDA
**************************************	**************************************
Signature/Registered Agent	2/24/03 Date
Tym techstano	4/24/03