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(Business Entity Name)

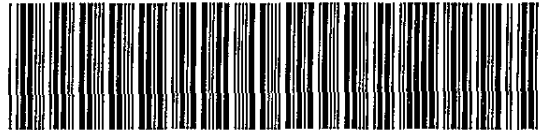
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FILED
03 APR 29 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

203-11548

APR 29 2003

TRANSMITTAL LETTER

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

SUBJECT: THE Giggle Box 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: Royce L. Thompson II
Name (Printed or typed)

819 Tammy Cove Lane
Address

Jacksonville, Florida 32218
City, State & Zip

(904) 962-3576
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 23, 2003

ROYCE L. THOMPSON II
819 TAMMY COVE LN
JACKSONVILLE, FL 32218

SUBJECT: THE GIGGLE BOX INC.
Ref. Number: W03000011548

We have received your document for THE GIGGLE BOX 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):

Please give a florida street address for the registered agent and the incorporator.

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) 245-6927.

Tracy Smith
Document Specialist
New Filings Section

Letter Number: 003A00024590

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03 APR 29 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

the Giggle Box, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

819 Tammy Cove Lane
Jacksonville, Florida 32218

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For any & all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Royce L. Thompson II (President & Secretary)
819 Tammy Cove Lane
Jacksonville, Florida 32218

Treasurer
(Vice-President)
Jimminda L. Thompson
819 Tammy Cove Lane
Jacksonville, Florida 32218

ARTICLE VI REGISTERED AGENT

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

Royce L. Thompson II
819 Tammy Cove Lane
Jacksonville, Florida 32218

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Royce L. Thompson II
819 Tammy Cove Lane
Jacksonville, Florida 32218

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

Royce L. Thompson II
Signature/Registered Agent

4/19/03
Date

Royce L. Thompson II
Signature/Incorporator

4/19/03
Date

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03 APR 29 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA