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TRANSMITTAL LETTER

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

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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	: Rosanne E. Bosse Name (Printed or typed)				
1000 DEREK LANE					
OLDS MAN, FLORIDA 34617					
8/3-676-3767 /129-942-1997					
Daytime Telephone number					

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

ARTICLES OF INCORPORATION

Signature/Incorporator

I he undersigned incorporator, for the purpose of forming a corporation under the rioru Business Corporation Act, hereby adopts the following Articles of Incorporation.	FILED
A DOMEST EN LA SEE	03 MAY 14 AM 10: 07
ARTICLE I NAME The name of the corporation shall be:	SEUNE JAKY UF STATE
Lightz FANTASTIC Inc.	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:	
OLDSMAR, FLORIDA 3467	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstandi	ing at any one time is:
25,000	
	INNPEGG
ARTICLE IV INITIAL REGISTERED AGENT AND STREET A The name and Florida street address of the initial registered agent are:	<u> </u>
DACA - A F RASCA	5.4
3829 LOUIS CIRCLE TARPON SPRING ARTICLE V INCORPORATOR	S, FLORIDA
ARTICLE V INCORPORATOR 34089)
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	
Rosanne E Bosse	
0000 / 11116 1 1001 -	
3829 LOUIS CIRCLE TARPON SPRINGS, FLORIDA 3468	9
TARPON SPRINGS, FLUICIPA	, , ,
(J 11)	-11

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for certificate, I hereby accept the appointment as registered agent and agree provisions of all statutes relating to the proper and complete performance.	e to act in this capacity. I further agree to comply with
obligations of my position as registered agent	5/12/03
Signature/Registered Agent	Date
POSUMNO I MISSE.	