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A handwritten signature in black ink, appearing to be a stylized name.

TRANSMITTAL LETTER

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

SUBJECT: GINGERHOUSE STUDIOS, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Richard A. Wollner, CPA. P.A.
Name (Printed or typed)

2917 West State Road 434, Suite #151
Address

Longwood, Florida 32779
City, State & Zip

(407) 869-6434
Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

GINGERHOUSE STUDIOS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

755 RAYMOND AVENUE
ALTAMONTE SPRINGS, FLORIDA 32701

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida address of the initial registered agent are:

Richard A. Wollner, CPA
2917 West State Road 434, Suite 151
Longwood, Florida 32779

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Richard A. Wollner, CPA
2917 West State Road 434, Suite 151
Longwood, Florida 32779

Richard A. Wollner
Signature/Incorporator

7/31/03
Date

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

Richard A. Wollner
Signature/Registered Agent

7/31/03
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA