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TRANSMITTAL LETTER

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

TALLAHASSEE FLORIDA

SUBJECT: Lollip	oop Press, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles 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: K	aren M. Abrahamson	· —	
	Name	(Printed or typed)	
	6568 Meandering Way	Address	
	Bradenton, FL 34202	, State & Zip	<u>. 4 ji</u>
	City	, state & Zip	
	(941)753-3261	Telephone number	

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

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:

Lollipop Press, Inc.

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TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6568 Meandering Way
Bradenton, FL 34202

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To sell handcrafted note cards.

ARTICLE IV SHARES

The number of shares of stock is:

One

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Karen M. Abrahamson, Owner 6568 Meandering Way Bradenton, FL 34202

ARTICLE VI REGISTERED AGENT

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

Karen M. Abrahamson 6568 Meandering Way Bradenton, FL 34202

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Karen M. Abrahamson 6568 Meandering Way Bradenton, FI 34202

Maren m. Abraicamon	8/27/03	
Signature/Registered Agent	Date	
haven m. Abrahamon	8/27/03	
Signature/Incorporator	Date	